



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 123809		2. Name of Corporation Snake Hill Trading Post Inc.			
3. Street Address Principal Business Office 375 Putnam Pike, #25			City Smithfield	State RI	Zip 02917
4. Business Phone No. (401) 232-7338		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island The sale of various goods at retail.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name LouAnn Valletta			Vice President Name Scott Fitzgerald		
Street Address 56 Hazel Street			Street Address 56 Hazel Street		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Secretary Name LouAnn Valletta			Treasurer Name Scott Fitzgerald		
Street Address 56 Hazel Street			Street Address 56 Hazel Street		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name LouAnn Valletta			Director Name Scott Fitzgerald		
Street Address 56 Hazel Street			Street Address 56 Hazel Street		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐ 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	Common, No Par Value		200	Common	None
			THIS SECTION MUST BE COMPLETED		

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED
File Date
Check No. MAR 06 2008
By DS 3989
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

LouAnn C. Valletta 2/22/08
Signature Date

LouAnn Valletta

Print or Type Name

President

Title