

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) to mixing to a penalty fee of \$25.00.

to a penalty fee of \$25.00.	> 4 circle corpora	con jasung or rejustng t	o file its annual report within ti	be time prescribed by law	(RLGL 7-6-91) te milita
1. Corporate ID No.	2. Name of Corporation	n			
106396	1		0 3 3 -		
3. State of Incorporation	4. Corporate address i	CK MUNIC	PAL REFIREES	<u></u>	
Rhade TSlaud	// -	Street Augn	*	City	Zip
5. Foreign corporation. Enter pr	ringing office and in	HE AVE		UMRWICK!	02886
F - mon time p	incipai ogjice adaress		City	State	7(b
6 Brief Description of the state		· · · · · · · · · · · · · · · · · · ·	_		,
6. Brief Description of the characte	r of the affairs which are a	actually conducted in Rhode	tsland	4	
10910 = IN FOR 1	MATION TO DUR	MEMBERY KEST	acting Changes candd	17000TOBENETIT	3 DHG KOTICE
President Nama	ES OF THE OFFICER	S: ("X" BOX FOR ATTAC	OG 26 C 174L F CHMENT) [] FILL IN SPACES	BEFORE USING ATTA	CHMENTS
			Vice President Name		
Street Address			Micheal MORILARTY		
56 MYRTLE NUE			Street Address		
City City	State		8 47 WEST SHOW	E & d	
WARWICK	R.I.	Zip	City	State	Zip
Secretary Name	1 (02886	LARRUICK	I R.D'	02819
i '			Treasurer Name		10-017
MANCY CORCORDN			Shirkey washburn		
O A C			Street Address		
P10. Box 18127			87 GEORGE ARIEW AUE.		
1 "	State	Zip	City	State	Zip
WARWICK	1 KIT.	02888	WARWICK	05	
6. NAMES AND ADDRESSE	S OF THE DIRECTO	RS: ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES	REPORT HEING AND	02886
THE NUMBER OF DIRECTO	ORS OF A DOMESTI	C (RHODE ISLAND)		PE LESS TOTAL	CHMENTS
Director Name			CORPORATION SHALL NOT Director Name	DE LESS THAN THRE	E (3). R.I.G.L. 7-6-23
LORRAINE MCDONALD			LEO PERROWE		
Street Address			LEO PERRONE Street Address		
32 LEVIH LANE			1		
City	State	Zip	66 Shand B	DUE.	
EXETER	R.T.	02822	1 "	State O	Zip
Director Name		1000 000	WARWICK	State R. I.	02886
ROSEANNE MELONE			Director Name		
Street Address			WALTER RICHARd SON		
bo PONTIAC ST.			Street Address		
City	State	Zíp	90 POSNEGAN	SETT AUE.	
WARWICK	RT.	02886	Cary .	State	Zip
9. REGISTERED AGENT IN I	CHODE ISLAND - DO	NOT ALTER - Chang	WARUICK	1 KV	62888
Ageru Name		Chang	es require filing of Form 6	41 - R.I.G.L. 7-6-13 / :	7-6-78
Robert B Ry	MR SR.		Address		
Address	74 10 J C1				
56 MYRTLE A	112		City	Zip	
7			WARWICK	028	-2-6
This report must b	e signed by either the	e President, Vice Presid	lent, Secretary, Assistant Secr		3 A
		,	om, secretary, Assistant Secr	etary, Treasurer, Receiv	er or Trustee
			TY 6		
			Under penalty of perjur	y, I declare and affirm the	at I have examined this
P -11			statements contained her	COMDanving schedules and	statements, and that all
File DateFLED			machens comainer ner	0	
			Walut B	Kan su	10-1-08
Check No. JUN 0 4 200	<u>o</u>		Signature of Officer	0	Date
17 4000			ROBERT BRYAN SR		
By:			Print or Type Name of Off	icer 3 K	
FOR SECRETARY OF STATE	THOS OF THE		PRESIDEN		
FOR SECRETARY OF STAT	E USE ONLY		- KRESIOLW	+	

Title of Officer