

Amended

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

148 W. Kwer 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 benalty fee of \$25.00.

* in accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusin law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.	g to file its annual report within thirty (30) days after the time prescribed by	
1. Corporate ID No. 2. Name of Corporation VC	tivelumber Inc.	
3. Street Address Principal Business Office 385 Wood Ville Rd	Hopkinton State RI 210 02833	
4. Business Phone No. 401-377-2837 5. State of Incorporation	-	
6. Brief Description of the Character of Business Conducted in Rhode Island LOG-GING SAWNILL OPERATION		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA OF President Name	. · · · · · · · · · · · · · · · · · · ·	
Londa Thompson	Tice President Name Times W Thompson	
Street Address 384 Wood ville Rd BOX85	Street Address v. B v x 570	
City Hupkinton State RI Zip 02833	City Corolina State RI 210 028/2	
Secretary Name Dyahna, Thompson	Treasurer Names W Thompson	
Street Address 921 Mayfair Drive	686 ALTONCAROLINA Rol	
City Belleville state IL 210 62221	City Corolina State RI 2102812	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT.	ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS	
Londa Mompson	Kathleen T Woodard	
384 Word Ville Rd	22.74 Chase Hill Rd	
City/topkinton state RI 2102833	Bradford State RI 210 02828	
Director Same Thompson	Director Name Linda Thompson Brennan	
Street Address 2 POST Rd - BOX 252	Street Address 312 Corolina Noweneck Rd	
Bowdion ham state ME Zip o 4008	City Richmond State RI 2102898	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)	
AUTHORIZED SHARES Number of Shares Class/Series Par Value	ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Par Value	
4000 NO PAR VAIVE	0014/401	
This report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by the receiver o	1 representative. If the corporation is in the hands of a receiver or trustee,	
and report must be executed on behalf of the corporation by the receiver to	i musico.	

	Under penalty of perjury, I declare and affirm that I have examined this report. The cluding any accompanying schedules and statements, and that all statements
File Date FILEDW	contained herein are true and correct. 7/29/08
Check No. JUL 3 0 2008	Date Drom OSTO
FOR SECRETARY OF STATE USE ONLY	65:31 Prompson Printer Type Name Vice President
	Form 630 Rev. 12/06

ID#10062

Director:

James W. Thompson P.O. BOX 570 Carolina, RI 02812



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

