



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

2009

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. 98418		2. Name of Corporation S. PETER MARCOVICH & COMPANY, INC. CERTIFIED PUBLIC ACCOUNTANTS			
3. Street Address Principal Business Office 26 Albion Road		City Lincoln	State RI	Zip 02865-0000	
4. Business Phone No. (401) 334-9099		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island Professional Services as Certified Public Accountants					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name S. Peter Marcovich			Vice President Name S. Peter Marcovich		
Street Address 26 Albion Road			Street Address 26 Albion Road		
City Lincoln	State RI	Zip 02865-	City Lincoln	State RI	Zip 02865-
Secretary Name S. Peter Marcovich			Treasurer Name S. Peter Marcovich		
Street Address 26 Albion Road			Street Address 26 Albion Road		
City Lincoln	State RI	Zip 02865-	City Lincoln	State RI	Zip 02865-
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name S. Peter Marcovich			Director Name none		
Street Address 26 Albion Road			Street Address none		
City Lincoln	State RI	Zip 02865-	City none	State none	Zip none
Director Name none			Director Name none		
Street Address none			Street Address none		
City none	State none	Zip none	City none	State none	Zip none
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.					
Number of Shares 100		Class/Series Common		Par Value No Par	
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	JAN 12 2009
Check No.	
By:	5496
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.

Signature *S. Peter Marcovich* Date **01/05/09**
S. Peter Marcovich
Print or Type Name
President
Title