



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

A. Ralph Molits, 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. 150567		2. Name of Corporation RYAN'S MARKET, INC			
3. Street Address Principal Business Office 70 BROWN STREET			City NORTH KINGSTOWN	State RI	Zip 02852
4. Business Phone No. 401-294-1210		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island To engage in the sale of groceries, deli items, and meats.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Edwin J. Ryan			Vice President Name Edwin J. Ryan		
Street Address 781 Ten Rod Road			Street Address 781 Ten Rod Road		
City North Kingstown	State Rhode Island	Zip 02852	City North Kingstown	State Rhode Island	Zip 02852
Secretary Name Edwin J. Ryan			Treasurer Name Edwin J. Ryan		
Street Address 781 Ten Rod Road			Street Address 781 Ten Rod Road		
City North Kingstown	State Rhode Island	Zip 02852	City North Kingstown	State Rhode Island	Zip 02852
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Edwin J. Ryan			Director Name		
Street Address 781 Ten Rod Road			Street Address		
City North Kingstown	State Rhode Island	Zip 02852	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares 1000	Class/Series Common	Par Value No Par Value

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.

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED
JAN 14 2009
By 078119
3:37

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 Edwin J. Ryan Date 10/28/08
Print or Type Name
Edwin J. Ryan
President
Title