



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. 25403		2. Name of Corporation JORDAN, APOSTAL, RITTER ASSOCIATES, INC.			
3. Street Address Principal Business Office 35 Belver Avenue			City North Kingstown	State RI	Zip 02852
4. Business Phone No. 401-884-3014		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A R&D FIRM SPECIALIZING IN CREATING AND DISTRIBUTING NUMERICAL ANALYSIS SOFTWARE, INCLUDING TRAINING SUPPORT AND TECHNOLOGY TRANSFER					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael C. Apostal			Vice President Name Charles J. Ritter		
Street Address 52 Crosswynd Drive			Street Address 204 Intrepid Lane		
City Saunderstown	State RI	Zip 02874	City Jamestown	State RI	Zip 02835
Secretary Name Charles J. Ritter			Treasurer Name Michael C. Apostal		
Street Address 204 Intrepid Lane			Street Address 52 Crosswynd Drive		
City Jamestown	State RI	Zip 02835	City Saunderstown	State RI	Zip 02835
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael C. Apostal			Director Name Charles J. Ritter		
Street Address 52 Crosswynd Drive			Street Address 204 Intrepid Lane		
City Saunderstown	State RI	Zip 02874	City Jamestown	State RI	Zip 02835
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 MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			300	Common	No Par

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.

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.

Michael C. Apostal 1/15/09  
Signature Date

Michael C. Apostal  
Print or Type Name

President

**FILED**

File Date JAN 20 2009

Check No. 3489

By [Signature]

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