RI SOS Filing Number: 200940757150 Date: 01/20/2009 4:00 PM

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.	2. Name of Corporation			
17524	RAMSAY ASSOCIATES, INC.			
3. Street Address Principal Business Office		City	State	Zip
19 Berwick Lane		Cranston	RI	02905
4. Business Phone No.	5. State of Incorporation			
401 467-7831	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
Promotional Marketing Sales and Consulting

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Street Address	City	State	Zip
A. Ramsay North	19 Berwick Lane	Cranston	RI	02905

Vice President Name	Street Address	City	State	Zip
None				

Secretary Name	Street Address	City	State	Zip
A. Ramsay North	19 Berwick Lane	Cranston	RI	02905

Treasurer Name	Street Address	City	State	Zip
A. Ramsay North	19 Berwick Lane	Cranston	RI	02905

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Street Address	City	State	Zip
A. Ramsay North	19 Berwick Lane	Cranston	RI	02905
Director Name	Street Address	City	State	Zip
Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
600	Common	No Par

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	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.

[redacted]

[redacted]

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.

A. Ramsay North — 1/8/09
Signature *Date*

A. Ramsay North
Print or Type Name

President
Title

File Date	1-20-09 / 1/20/09
Check No.	20835 / 20835
By	MMC / MMC

FOR SECRETARY OF STATE USE ONLY

[redacted]

29984-22-336519

Form 630 Rev. 12/06