

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

Form 630 Rev. 08/08

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(cérd)) is

subject to a penalty fee of \$25.00.		mater fatting or refusing to fite us an				
1. Corporate ID No. 6796	2. Name of Corp R.D. DENE	2. Name of Corporation R.D. DENELLE & COMPANY, INC.				
Street Address Principal Business Office 133 Old Tower Hill Road, Ste. 1		Wakefield	State RI	<sup>Zip</sup> <b>02879</b>		
789-0217		5. State of Incorporation Rhode Island	Rhode Island			
5. Brief Description of the Characte Real Estate						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Dennis G. Denelle			Vice President Name Dale D. Denelle			
Street Address Pine Hill Road			Street Address 61 Christopher Street			
<sup>City</sup> Wakefield	State RI	<sup>Ζιρ</sup> <b>0287</b> 9	City Wakefield	State RI	<sup>Zip</sup> 02879	
Secretary Name Archibald B. Kenyon, Jr.			Treasurer Name Ronald D. D?enelle			
Street Address 133 Old Tower Hill Road, Ste. 1			Street Address 55 Cliff Drive			
<sub>Сііу</sub> Wakefield	State RI	<sup>2ip</sup> 02879	City Narragansett	State RI	<sup>Zip</sup> <b>02882</b>	
8. NAMES AND ADDRESSI Director Name Ronald D. Denelle	S OF THE DIR	ECTORS: ("X" BOX FOR AT	TACHMENT)	N SPACES BEFORE USIN	G ATTACHMENTS	
Street Address 55 Cliff Drive			Street Address 55 Cliff Drive			
city Narragansett	State R1	Ζιρ 02882	City Narragansett	State RI	Ζιρ <b>02882</b>	
Director Name Archibald B. Kenyon, Ju	·.		Director Name			
Street Address 133 Old Tower Hill Road, Ste. 1			Street Address			
City Wakefield	State RI	<sup>Ζιρ</sup> <b>02879</b>	СИу	State	Zip	
9. SHARES AUTHORIZED	•	•		("X" BOX FOR ATTAC CTION <u>MUST</u> 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	Class/Series	Par Value	
			100	Common	No Par	
					<u> </u>	
This report must be execut this report must be execute	ed on behalf of t d on behalf of th	he corporation by an authoriz ne corporation by the receiver	ed representative. If the coor trustee.	corporation is in the hand	is of a receiver or tru	

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements
File Date	contained herein are true and correct!
Check No. JAN 2 8 2009	Ronald D. Denelle
By: By 3246	Print or Type Name  Treasurer,
FOR SECRETARY OF STATE USE ONLY	Title