



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. 117066		2. Name of Corporation KANSAS DONUTS, INC.			
3. Street Address Principal Business Office 12 Leila Jean Drive			City Bristol	State RI	Zip 02809-0000
4. Business Phone No.		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island operation of a donut franchise					
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Neal Faulkner			Vice President Name Antonio Placido		
Street Address 279 Newbury Street			Street Address 12 Leila Jean Drive		
City Boston	State MA	Zip 02116	City Bristol	State RI	Zip 02809
Secretary Name Erica Placido			Treasurer Name Denise Nicolace		
Street Address 12 Leila Jean Drive			Street Address 14 Pine Acres Drive		
City Bristol	State RI	Zip 02809	City Bellingham	State MA	Zip 02019
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Antonio Placido			Director Name Neal Faulkner		
Street Address 12 Leila Jean Drive			Street Address 279 Newbury Street		
City Bristol	State RI	Zip 02809	City Boston	State MA	Zip 02116
Director Name Erica Placido			Director Name Denise Nicolace		
Street Address 12 Leila Jean Drive			Street Address 14 Pine Acres Drive		
City Bristol	State RI	Zip 02809	City Bellingham	State MA	Zip 02019
9. SHARES AUTHORIZED					
10. SHARES ISSUED (*X* BOX FOR ATTACHMENT) ☐					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares 100		Class/Series Common		Par Value No Par	
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.					

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 28 2009
Check No.	By 389
By:	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 **Neal Faulkner** Date **01/05/09**
Print or Type Name
President
Title