

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(cord)) is

subject to a penalty fee of \$25.00.	1 ,				
1. Corporate ID No. 159509					
3. Street Address Principal Business Office 72 Ridge Dr.			City Exeter	State R.I.	<i>Ζψ</i> 02822
4. Business Phone No. 5. State of Incorporation Rhode Island					
6 Brief Description of the Character of Consulting & publishing in m		oode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name John E. Gross			CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name John E. Gross		
Street Address 72 Ridge Dr.			Street Address 72 Ridge Dr.		
City Exeter	State R.I.	^{Ζtp} 02822	City Exeter	State R.I.	^{Ζφ} 02822
Secretary Name John E. Gross			Treasurer Name John E. Gross		
Street Address 72 Ridge Dr.			Street Address 72 Ridge Dr.		
City Exeter	State R.I.	^{Ζiρ} 02822	City Exeter	State R.I.	^{Zip} 02822
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name John E. Gross			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name		
Street Address 72 Ridge Dr.			Street Address		
City Exeter	State R.I.	<i>Zip</i> 02822	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) [] ISSUED SHARES — 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.			Number of Shares	Class/Series	Par Value
			150	Common	None
This report must be executed this report must be executed of			d representative. If the corporator trustee.	ation is in the hands of a	receiver or trustee,

File Date	FILED
Check No.	FEB 02 2009
Ву:	By 3739
•	OR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and at including any accompanying schedules a contained herein are true and correct.	-
Signature	Date
John E. Gross	
Print or Type Name	
President	
Title	Form 630 Rev. 08/08