

FOR SECRETARY OF STATE USE ONLY

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 tin

subject to a penalty fee of \$2	?5.00.	, , , , , , , , , , , , , , , , , , , ,	(30)	aus uper the time prescribed by	iaw (R.I.G.L. /-1.2-1501(c&d)) is	
1. Corporate ID No. 144926	RECRÉA-	2. Name of Corporation RECREATIONAL SPECIALTIES, INC.				
3. Street Address Principal Business Office 53 A Sandy Bottom Road			City Coventry	State RI	7:ip 02816	
644-5957 Rhod		5. State of Incorporation Rhode Island	ration			
	atalog Sales of Pool,	Spa and Recreational Produ				
7. NAMES AND ADDI	RESSES OF THE OFF	ICERS: ("X" BOX FOR ATT	4 <i>CHMENT</i>) □ FILL II	N SPACES REPORT HEING	ATTACITATE STOR	
			Vice President Name	. OTHER BEIORE GSING	ATTACHMENTS	
Eric K. Stockley			Joseph E. Stockley			
Street Address 53 A Sandy Bottom Road			Street Address 53 A Sandy Bottom Road			
City Coventry	State RI	^{Zip} 02816	City Coventry	State RI	Zip 02816	
Secretary Name Joseph E. Stockley			Treasurer Name Joseph E. Stockley			
Street Address						
53 A Sandy Bottom Road City State Zip			Street Address 53 A Sandy Bottom Road			
Coventry	R!	02816	Coventry	State RI	^{Zip} 02816	
8. NAMES AND ADDR	ESSES OF THE DIRE	ECTORS: ("X" BOX FOR AT	•	IN SPACES BEFORE USIN	I∎	
Director Name			Director Name		o mirchments	
Eric K. Stockley Street Address			Joseph E. Stockley			
			Street Address			
53 A Sandy Bottom Road City State Zin		53 A Sandy Bottom Road				
Coventry	RI	74p 02816	City	State	Zip	
Director Name			Coventry Director Name	RI	02816	
_			Director Name			
Street Address			Street Address			
City	State	Zip	Сиу	State	1	
				June	Zip	
9. SHARES AUTHORIZ	ED	·	10. SHARES ISSUED	O ("X" BOX FOR ATTACE ECTION MUST BE COMPLETED	HMENT)	
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		
				Common	No Par	
This report must be exe	cuted on behalf of th	e corporation by an authorize	d representative. If the	corporation is in the bands	- 6 -	
this report must be exec	cuted on behalf of the	corporation by the receiver of	or trustee.	corporation is in the nands	of a receiver or trustee,	
			Under negative of	parium I do alore en 4 . ff		
			including any acc	companying schedules and star	hat I have examined this report tements, and that all statement.	
2	10 19		contained herein	are true and correct.		
File Date _	10-01		[M1 -	o l	2/6/103	
Check No. 11	462		Signature		Date	
Check No.	100		JOSPD	h E Storr	7	
Ву:	mne		Print or Type Nam		~	