



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. 10171		2. Name of Corporation 3 C VENTURE, INC.		
3. Street Address Principal Business Office 74 STONE DRIVE		City CRANSTON	State R-I	Zip 02920
4. Business Phone No. 401-943-7138		5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name VERONICA P. CROCE		Vice President Name ARTHUR S. CROCE		
Street Address 20 PALMER AVE.		Street Address 20 PALMER AVE.		
City CRANSTON	State R-I	Zip 02920	City CRANSTON	State R-I
Secretary Name THOMAS CROCE, JR.		Treasurer Name THOMAS CROCE, JR.		
Street Address 74 STONE DRIVE		Street Address 74 STONE DRIVE		
City CRANSTON	State R-I	Zip 02920	City CRANSTON	State R-I
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name VERONICA P. CROCE		Director Name THOMAS CROCE, JR.		
Street Address 20 PALMER AVE.		Street Address 74 STONE DRIVE		
City CRANSTON	State R-I	Zip 02920	City CRANSTON	State R-I
Director Name ARTHUR S. CROCE		Director Name		
Street Address 20 PALMER AVE.		Street Address		
City CRANSTON	State R-I	Zip 02920	City	State
9. SHARES AUTHORIZED 600		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.		ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
		Number of Shares	Class/Series	Par Value
		600 NO PAR VALUE 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.

FILED	
File Date	FEB 12 2009
Check No.	
By	992
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.

Arthur S. Croce 2/6/09
Signature Date
ARTHUR S. CROCE
Print or Type Name
VICE PRESIDENT
Title