

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

401.222.30

Filling Period: January 1 - March 1 • Filling 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(cctd)) is

subject to a penalty fee of 3.	25.00.		-	7 7	(101.0.E. )-1.2-1.01(EO	
1. Corporate ID No. 97576	2. Name of Co PUCCI &	2. Name of Corporation PUCCI & GREENE, LTD.				
3. Street Address Principal Business Office 1 Canal Street			City Westerly	State RI	<i>гір</i> 02891	
4. Business Phone No. 5. State of Incorpora Rhode Island			1		02001	
6. Brief Description of the C Certified Public Acc	Character of Business Condi Countants	ucted in Rhode Island	-		-	
7. NAMES AND ADD President Name Stewart T. Pucci	RESSES OF THE OFF	ICERS: ("X" BOX FOR AT	VACHMENT)   FILL IN  Vice President Name	SPACES BEFORE USING	G ATTACHMENTS	
Street Address 1 Canal Street			Street Address			
City Westerly	State RI	<sup>Zip</sup> 02891	City	State	Zip	
Secretary Name Stephen M. Greene			Treasurer Name Stephen M. Greene			
Street Address 1 Canal Street			Street Address 1 Canal Street			
City Westerly	State RI	<sup>Zip</sup> 02891	City Westerly	State RI	<sup>Zip</sup> 02891	
B. NAMES AND ADDI Director Name Stewart T. Pucci	RESSES OF THE DIRI	ECTORS: ("X" BOX FOR A	TTACHMENT)  FILL IN  Director Name	SPACES BEFORE USIN	NG ATTACHMENTS	
Street Address  Canal Street			Street Address			
ाए Westerly	State RI	<i>Zip</i> 02891	Сиу	State	Zip	
Director Name Stephen M Greene	)	***************************************	Director Name			
ireet Address 1 Canal Street			Street Address	19. Id.	***	
ուր Vesterly	State RI	<sup>Zip</sup> 02891	City	State	Zip	
. SHARES AUTHORI	ZED		10. SHARES ISSUED	 <i>("X" BOX FOR ATTAC</i> TION <u>MUST</u> 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	<del></del>	
			200	Common	Par Value  No Par	
			100			
This report must be ex	ecuted on behalf of the	e corporation by an authoriz	red representative. If the co	orporation is in the hand	s of a receiver or truste	

behalf of the corporation by the receiver or trustee.

File Date FILED
Check NoFEB 1 7 2009
By: By 3793
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare including any accompanying sched	and affirm that I have examined this report, Jules and statements, and that all statements
contained herein are true and corre	ect.
2×10-	11,8/09
Signature	Date
Stewart T. Pucci	
Print or Type Name	
President	
Title	
	Form 630 Pay 09/09