

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 white to a penalty file of \$25.00.

subject to a penalty fee of \$2	25.00.				
1. Corporate ID No.	2. Name of Cor	boration			
33304	ATLANT	TIC POWER & SAIL MA	RINE CORPORATION		
3. Street Address Principal Business Office			City	State	Zip
81 County Road			Barrington	RI	02806
4. Business Phone No. 5. State of Incorporation		·			
(401) 245-2087 RHODE ISLAN			ID		
5. Brief Description of the C	Character of Business Condu	cted in Rhode Island See Exhi	bit "A" attached	hereto and m	ade part hereof
ontrol char NAMES AND ADD	uild, constructer manage or the orr	t, make, manufactu pperate deal in an I CERS: (** BOX FOR ATTA		r, alter, rec whatsoever, m ACES BEFORE USIN	onstruct, buy, se arine appraising, GATTACHMENTS
Stephen Mainella			Vice President Name SAME		
Street Address			Street Address		
81 County Re	oad		•		
СИДУ	State	Zip	: City	State	Zip
Barrington	RI	02806			- T
Secretary Name			Treasurer Name SAME		
Street Address			Street Address		
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СИУ	State	Zip	City	State	Zip
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. NAMES AND ADD	RESSES OF THE DIRI	CTORS: ("X" BOX FOR AT	<i>TACHMENT)</i> TILL IN S	SPACES BEFORE USI	NG ATTACHMENTS
Pirector Name			Director Name		
NONE			NONE		
ireei Address			Street Address		
îtîy .	State	Zip	City	State	Zip
	J		***************************************		
Director Name			Director Name		
NONE			NONE		
treet Address			Street Address		
Сиу	State	Zip	City	State	Zip
					, '
. SHARES AUTHORI	(ZED)		10. SHARES ISSUED ("X" BOX FOR ATTAC	HMENT)
			ISSUED SHARES — THIS SECT.	The state of contract of the state of the st	
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
					7 th Yank
			50	Common	No par value
			SHE BROT		CHURCH IN THE
			9 # 88 ME OF BRANCH S		
Tie Date	ecuted on behalf of the	ne corporation by an authorize e corporation by the receiver of	or trustee. Under penalty of perj	iury, I declare and affirm panying schedules and a application of the control of the control application of the control of the	a that I have examined this replatements, and that all statements.
{sv.} by _	るだ	# 1	Print or Type Name	INCLIA	
FOR SECRETAR	Y OF STATE USE ONLY		<u>President</u> Title		
	to the first of th		inte		