

A. Ralph Mollis, Secretary of Sta Corporations Divisi 148 W. River Str

Providence, RI 02904-26

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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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. 7-1.2-150). 401.222.30

68250	7-1.2-1301(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&a C.P.S. Properties, Inc.				
3. Street Address Principal B 17 Commerce St	usiness Office		City	State	Zip
4. Business Phone No. 401-949-4400 5. State of Incorporat		Greenville	RI	02828	
6. Brief Description of the Ch			, , , , , , , , , , , , , , , , , , ,		
President Name Robert Saucier	ESSES OF THE OF	FICERS: ("X" BOX FOR AT	TACHMENT) TILL II Vice President Name Robert Saucier	N SPACES BEFORE USIN	NG ATTACHMENTS
Street Address 99 Pine Hill Road			Street Address Same		
City North Scituate Secretary Name	State RI	7tp 02857	City	State	Zip
Robert Saucier Brown Address			Treasurer Name Robert Saucier		
Same			Street Address Same		
	State	Zip	City	State	Z(p
CODEIT Saucier	SSES OF THE DIR	ECTORS: ("X" BOX FOR AT	TACHMENT) [FILL] Director Name	IN SPACES BEFORE USI	NG ATTACHMENTS
eet Address ame			Street Address		
ty	State	Zip	City	State	Zip
rector Name	***************************************		Director Name		
eet Address			Street Address		
y	State	Zip	City	State	Zip
SHARES AUTHORIZE	n Miller (1986) i Professoria. 		10. SHARES ISSUED	("X" BOX FOR ATTAC CTION MUST BE COMPLETED	HMENT)
his information is currently of record in the Office of the Secretary of ate. Changes require an additional filing. See Section 9 of			Number of Shares	Class/Series	Par Value
struction sheet.		1600	Common	No Par	
is report must be executed on behalf of the corporation by an authorize report must be executed on behalf of the corporation by the receiver of					- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Date	50 : Ald	FILED FEB 1 9 2009 By 08137/ TWO 618336007	Under penalty of princluding any according herein and Signature Robert Sauci	erjury, I declare and affirm the mpanying schedules and state true and correct.	
FOR SECRETARY OF S	ETATE USE ONLY (Print or Type Name President		