

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

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. 67757	2. Name of Corporation COVE PROPERTIES OF WICKFORD, INC					
3. Street Address Principal Business Office 58 COLLATION CIRCLE			N. KINGSTOWN	State RI	<i>Хір</i> 02852	
1 404 555 555		5. State of Incorporation RHODE ISLAND	•			
6. Brief Description of the Character of Business Conducted in Rhode Island TO OWN, DEVELOP, REPAIR, SELL, RENT, AND GENERALLY DEAL WITH REAL AND PERSONAL PROPERTY.						
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT) [] FILL IN SPAC	ES BEFORE USING ATTA	ACHMENTS	
President Name ROBERT G. JOHNSTON			Vice President Name			
8 SCHOONER COVE ROAD			Street Address			
NARRAGANSETT	State RI	<i>որ</i> Մ2882	СПу	State	Zip	
DARLENE HEARD			Treasurer Name STEPHEN HEARD			
Street Address 41 NEWPORT AVE			Street Address 41 NEWPORT AVE			
N. KINGSTOWN	State RI	хір 02852	City N. KINGSTOWN	State RI	<i>Σip</i> 02852	
8. NAMES AND ADDRESSES	OF THE DIRECTORS	: ("X" BOX FOR ATTA	ACHMENT) [] FILL IN SPA	CES BEFORE USING AT	TACHMENTS	
ROBERT G. JOHNSTON			Director Name			
Street Address			Street Address			
8 SCHOONER COVE RC		.,.				
NARRAGANSETT Director Name	State RI	Հւր 02882	City	State	Z(p	
Director Adme			Director Name			
Street Address			Street Address			
City	State	Ζijρ	City	State	Zip	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares Class Series Par Value			Number of Shares Class Series Par Value			
8,000 COMM	ON STOCK \$	61.00	2,000	COMMON STOCK		
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. 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. The Date of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee. 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. The Date of the Corporation by the receiver or trustee. PEB 18 2009 Check No. By: Print or Type Name PRESIDENT						
FOR SECRETARY OF STAT	E USE ONLY		PRESIDENT Title			