

FOR SECRETARY OF STATE USE ONLY

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(cerd)) is

14034 - Singer Jobbess Principal Busin	1	eam Development Corpora	· · · · · · · · · · · · · · · · · · ·		Lea
; Sircet Address Principal Business Office 7 Curtin Drive			Cumberland	State RI	02864
401-333-4455 5. State of Incorporation Rhode Island					
 brief Description of the Chara Development and Sale of 		cted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name William J. Geddes			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Elise B. Geddes		
Sircer Address 7 Curtin Drive			Street Address 7 Curtin Drive		
ம் Cumberland	State RI	Zip 02864	City Cumberland	State RI	^{ир} 02864
Serviny Name Elise B. Geddes			Treasurer Name William J. Geddes		
7 Curtin Drive			Street Address 7 Curtin Drive		
Cumberland 8. NAMES AND ADDRESS	SES OF THE DIR	Дір 02864 ECTORS: ("X" BOX FOR ATT	Cuy Cumberland	State RI	7/p 02864
Director Name William J. Geddes		SCIONS. (A BOX FOR AT	Director Name Nathaniel S. Thaye		G ATTACHMENTS
7 Curtin Drive			Street Address 150 Main Street		
Cumberland	State RI	02864	City- Pawtucket	State RI	2φ 02860
Director Name			Director Name		••••••
Street Address			Street Address		
$< \hat{H}_{1}^{*}$	State	Zip	City:	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) SSUED SHARES — THIS SECTION MUST BE COMPLETED		
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
			100	Common	No Par Val
This report must be executhis report must be execut	ted on behalf of t	he corporation by an authorize ne corporation by the receiver	ed representative. If the contracted	corporation is in the hand	s of a receiver or tr
		- Important by the receiver	or dayou,		
			Hadan assatu - #	sonium. I doule 1 . C''	alore 2 to .
			Onder penalty of p	perjury, I declare and affirm ompanying schedules and st	man I have examined t
FILE					atements, and that an
FILE				re true and correct.	2/17

Print or Type Name President

Title