

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 401.222.30Filing 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(cc/d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 56308	2. Name of Corporation	2. Name of Corporation RICHARD A. GREENE & ASSOCIATES, INC.				
3. Street Address Principal Business Office 2 ELM STREET			WESTERLY	State RI	<i>Ζip</i> <b>02891</b>	
4. Business Phone No. 5. State of Incorporation (401) 596-0225 RHODE ISLAND						
6. Brief Description of the Chard LAND SURVEYING	ucter of Business Conducted in	Rhode Island				
7. NAMES AND ADDRES President Name Richard A. Greene	SES OF THE OFFICERS	: ("X" BOX FOR ATTA	CHMENT) TILL IN Vice President Name	SPACES BEFORE USING A	ATTACHMENTS	
Street Address 12 Richmond Townhouse Road			Street Address			
Wyoming	State Rhode Island	<sup>Zip</sup> 02898	City	State	Zip	
Secretary Name Richard A. Greene			Treasurer Name Richard A. Greene			
Street Address 12 Richmond Townhouse Road			Street Address 12 Richmond Townhouse Road			
City <b>Wyo</b> ming	State Rhode Island	<sup>Zip</sup> 02898	City Wyoming	State Rhode Island	<sup>Zip</sup> 02898	
8. NAMES AND ADDRES Director Name Richard A. Greene Street Address	SSES OF THE DIRECTO	RS: ("X" BOX FOR AT	ACHMENT)   FILL I Director Name  Street Address	N SPACES BEFORE USING	GATTACHMENTS	
12 Richmond Townhouse Road						
City Wyoming	State Rhode Island	<sup>Ζip</sup> 02898	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
Сйу	State	Ζψ	City	State	Ziţı	
9. SHARES AUTHORIZE	I BD	1		) <i>("X" BOX FOR ATTACE</i> ECTION <u>MUST</u> BE COMPLETED	IMENT)	
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	
This report must be exec	cuted on behalf of the co	rporation by an authoriz	ed representative. If the	corporation is in the hands	s of a receiver or trustee,	
this report must be exec	uted on behalf of the cor	poration by the receiver	or trustee.			
File Date	<i>)</i>		including any ac	perjury, I declare and affirm to companying schedules and state are true and correct.	tements, and that all statemen	
Check NoFEB 2 0 2009			Richard A. Greene			
By 15/34			Print or Type Name President			
FOR SECRETARY OF STATE USE ONLY			Title			