



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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. 62878		2. Name of Corporation Cranwilde, Inc.			
3. Street Address Principal Business Office C/O Gravestarr, Inc; 160 Second Street			City Cambridge	State MA	Zip 02142
4. Business Phone No. 617-492-4118		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Real Estate Property Management					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anne M. Oppenheim			Vice President Name		
Street Address 10 Heath Wood Lane			Street Address		
City Chestnut Hill	State MA	Zip 02467	City	State	Zip
Secretary Name Anne M. Oppenheim			Treasurer Name David T. Ting		
Street Address 10 Heath Wood Lane			Street Address 1 Wentworth Drive		
City Chestnut Hill	State MA	Zip 02467	City Southboro	State MA	Zip 01772
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anne M. Oppenheim			Director Name David T. Ting		
Street Address 10 Heath Wood Lane			Street Address 1 Wentworth Drive		
City Chestnut Hill	State MA	Zip 02467	City Southboro	State MA	Zip 01772
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100	A Common	\$100

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.

File Date	FILED
Check No.	FEB 23 2009
By:	By 30
FOR SECRETARY OF STATE USE ONLY	

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.

Signature Anne M. Oppenheim Date 2-20-09
Print or Type Name
Director
Title