

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(codd)) is

subject to a penalty fee of \$25.						
1. Corporate ID No. 70088	2. Name of Corporation Water Damage	2. Name of Corporation Water Damage Drying Services, Inc.				
3. Street Address Principal Business Office 2 Elm Street - P.O. Box 414			City Westerly	State Rhode Island	^{Zip} 02891	
4. Business Phone No. 5. State of Incorporation (401) 596-0225 RHODE ISLAND						
6. Brief Description of the Ch Water Damage Drying	aracter of Business Conducted in 1 g Service	Rhode Island				
7. NAMES AND ADDR	ESSES OF THE OFFICERS:	("X" BOX FOR ATTA		SPACES BEFORE USING A	ITACHMENTS	
President Name			Vice President Name			
R. Philip Mason			Suzanne H. Mason			
Street Address 7 Robin Way			7 Robin Way			
^{City} Westerly	State Rhode Island	^{<i>Ztp</i>} 02891	City Westerly	Rhode Island	^{Zip} 02891	
Secretary Name R. Philip Mason			Treasurer Name R. Philip Mason			
Street Address 7 Robin Way			Street Address 7 Robin Way			
City Westerly	State Rhode Island	^{Zip} 02891	City Westerly	State Rhode Island	^{Zip} 02891	
8. NAMES AND ADDR	ESSES OF THE DIRECTOR	S: ("X" BOX FOR ATT		N SPACES BEFORE USING	ATTACHMENTS	
Director Name			Director Name			
R. Philip Mason			Ryan P. Mason			
Street Address			Street Address 1 Jovere Drive			
7 Robin Way	La	7:-	City	State	Zip	
City Mostorly	State Phodo loland	<i>Ζi</i> ρ 02891	Westerly	Rhode Island	02891	
Westerly	Rhode Island	102091	: VVESIEITY : Director Name	Triloge island	102031	
Director Name Suzanne H. Mason			Director Nume			
Street Address			Street Address			
7 Robin Way			. Sites have es			
City	State	Zip	City	State	Zip	
Westerly	Rhode Island	02891				
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
			ISSUED SHARES — THIS SE	ECTION 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	
			20	Common	No Par	
This report must be ev	secuted on behalf of the cor	poration by an authorize	d representative. If the	corporation is in the hands	of a receiver or trustee	
this report must be exe	ecuted on behalf of the corp	poration by the receiver	or trustee.			
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File Date FILED	
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FOR SECRETARY OF STATE USE ONLY	A

	and affirm that I have examined this report, ules and statements, and that all statements ct.
- Vin Ma	W 2/17/09
Signature	Date 1
R. Philip Mason	
Print or Type Name	
President	
Title	