

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(cc/cd)) is

subject to a penalty fee of \$25.00.		o , o , , ,		2 3	
1. Corporate ID No 140701	2. Name of Corporation FWS Corp.				
3. Street Address Principal Business Office 50 WASHINGTON SQUARE			City: NEWPORT	State RHODE ISLAND	^{Ζψ} 02840
4. Business Phone No. 5. State of Incorporation RHODE ISLAND					
6. Brief Description of the Character of Business Conducted in Rhode Island To engage in the real estate business including without limitations buying housing and estate primary for low and moderate Box For ATTAC President Name STEPHEN P. OSTIGUY Street Address					
50 WASHINGTON SQAURE			50 WASHINGTON SQUARE		
NEWPORT	State RHODE ISLAND	^{Zip} 02840	City NEWPORT	State RHODE ISLAND	^{Zip} 02840
Secretary Name ROBERT M. SABEL			Treasurer Name CASIMIRE KOLASKI		
Street Address 50 WASHINGTON SQUARE			Street Address 50 WASHINGTON SQUARE		
NEWPORT	State RHODE ISLAND	^{Zip} 02840	Offy NEWPORT	State RHODE ISLAND	^{Zip} 02840
8. NAMES AND ADDRESSES Director Name STEPHEN P. OSTIGUY	OF THE DIRECTORS	: ("X" BOX FOR ATT	ACHMENT) TELL II Director Name CASIMIRE KOLAS	n spaces before using at	TACHMENTS
Street Address 50 WASHINGTON SQUARE			Street Address 50 WASHINGTON SQUARE		
City NEWPORT	State RHODE ISLAND	<i>Zip</i> 02840	Olly NEWPORT	State RHODE ISLAND	Zip 02840
Director Name ROBERT M. SABEL			ROBERT M. SABEL		
Street Address 50 WASHINGTON SQUARE			Street Address 50 WASHINGTON SQUARE		
NEWPORT 9. SHARES AUTHORIZED	State RHODE ISLAND	^{Zip} 02840		State RHODE ISLAND O ("X" BOX FOR ATTACHME ECTION MUST BE COMPLETED	Zip 02840 ENT)
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		\$1.00
This report must be executed this report must be executed				corporation is in the hands of	a receiver or trustee,

File Date	2-23-09
Check No	001168
Ву:	MMO
	FOR SECRETARY OF STATE USE ONLY

Under pengity of perjury, I declare and affir	m that I have examined this repor
including any accompanying schedules and	statements, and that all statement
contained herein are true and gorrect.	
1-11 11/1 Va	~ ~ ~

STEPHEN P. OSTIGUY

Print or Type Name

PRESIDENT

Title