



Office of the Secretary of State

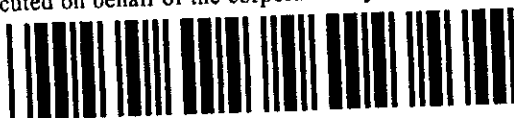
Providence, RI 02904-2615
401.222.3040

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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 80101		2. Name of Corporation KDK Corp.		City COVENTRY		State R.I.		Zip 02816							
3. Street Address Principal Business Office 1 JACK PINE RD.					5. State of Incorporation RHODE ISLAND										
4. Business Phone No. 888-1420					6. Brief Description of the Character of Business Conducted in Rhode Island TO ACT AS A GENERAL PARTNER OF A LIMITED PARTNERSHIP.										
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS.					Vice President Name KIMBERLY ASHLEY										
President Name None					Street Address 1 JACK PINE RD.										
City COVENTRY		State R.I.		Zip 02816		Treasurer Name SAME									
Secretary Name SAME					Street Address										
City		State		Zip		City		State		Zip					
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS.					Director Name NONE					Street Address					
City		State		Zip		City		State		Zip					
Director Name					Street Address					City		State		Zip	
Director Name					Street Address					City		State		Zip	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐					10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐										
AUTHORIZED SHARES					ISSUED SHARES — THIS SECTION MUST BE COMPLETED										
Number of Shares		Class/Series		Par Value		Number of Shares		Class/Series		Par Value					
8,000 \$1.00 PAR VALUE		COMMON				NONE									

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	2-24-09	*80101
Check No.	733	
By	MNC	
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: Kimberly Ashley Date: 2/22/09
Print or Type Name: KIMBERLY ASHLEY
Title: Vice Pres / Treasurer / Secretary