

ubject to a penalty fee of \$25.00.

File Date FILE

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FOR SECRETARY OF STATE USE ONLY

I. Corporate ID No. 68285

A. Ralph Mollis, Secretary of Star Corporations Divisio 148 W. River Stree Providence, RI 02904-261 401.222.304

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

2. Name of Corporation
S&R Properties of Rhode Island,Ltd

| 3. Street Address Principal Business Office<br>24 Indian Lane  |  | South Salem  | NY<br>NY                   | 10590                           |
|--|--|--|----------------------------|---------------------------------|
| 1,251(3)11230 1 10 0 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |  |  |                            |                                 |
| maintain and opera   | ite the real property and impr   | ovements commonly kn   | own as Two Corporate F     | Park located at Two ATTACHMENTS |
| Street Address<br>24 Indian Lane   |  | Street Address   |                            |                                 |
| State<br>NY  | <sup>Zip</sup><br>10590  | City   | State                      | Ζip                             |
| Secretary Name<br>Alan W. Lasker   |  | Treasurer Name Alan W. Lasker  |                            |                                 |
| Street Address<br>21 Gedney Way  |  | Street Address 21 Gedney Way   |                            |                                 |
| State<br>NY  | <sup>Zip</sup> 10514   | City<br>Chappaqua  | State<br>NY                | <sup>Ζφ</sup><br>10514          |
| SSES OF THE DIRE   | ECTORS: ("X" BOX FOR ATI   | ACHMENT)  FILL II  Director Name   | N SPACES BEFORE USIN       | G ATTACHMENTS                   |
| Street Address 24 Indian Lane  |  | Street Address   |                            |                                 |
| State<br>NY  | <i>Zip</i><br>10590  | City   | State                      | Zip                             |
|  |  | Director Name  |                            |                                 |
| Street Address   |  | Street Address   |                            |                                 |
| State  | Zip  | City   | State                      | Zip                             |
| ). SHARES AUTHORIZED   |  | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) [ ISSUED SHARES - THIS SECTION 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                       |
|  |  | 10   | Common                     | No Par Value                    |
| ecuted on behalf of the cuted on behalf of the   | the corporation by an authoriz-<br>the corporation by the receiver   | ed representative. If the or trustee.  | corporation is in the hand | ds of a receiver or truster     |
|  | State NY  State NY  State NY  State NY  State State NY | State NY 10590  State NY 10590 | South Salem                | South Salem   NY                |

including any accompanying schedules and statements, and that all statemen

contained herein are true and correct.

Steven Roberts Print or Type Name President

Signature

Title