



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 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. 14047		2. Name of Corporation HALGREN HOMES, INC.			
3. Street Address Principal Business Office 55 MONTEBELLO ROAD			City WARWICK	State RI	Zip 02886
4. Business Phone No. 401-783-0519		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island HOUSE BUILDING					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Sylvia Greenfeld			Vice President Name Neil Greenfeld		
Street Address 87 Betsy Williams Drive			Street Address 27 Bennington Road		
City Cranston	State RI	Zip 02905	City Cranston	State RI	Zip 02920
Secretary Name Cheryl Teverow			Treasurer Name Sylvia Greenfeld		
Street Address 2 Wriston Drive			Street Address 87 Betsy Williams Drive		
City Providence	State RI	Zip 02906	City Cranston	State RI	Zip 02905
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Cheryl Teverow			Director Name Sylvia Greenfeld		
Street Address 2 Wriston Drive			Street Address 87 Betsy Williams Drive		
City Providence	State RI	Zip 02906	City Cranston	State RI	Zip 02905
Director Name Neil Greenfeld			Director Name		
Street Address 27 Bennington Road			Street Address		
City Cranston	State RI	Zip 02920	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	Common	No Par

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.

FILED	
File Date	FEB 27 2009
Check No.	
By:	By 874
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.

X Sylvia Greenfeld 2/24/09
Signature Date
Sylvia Greenfeld
Print or Type Name
President
Title