



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River St., 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

* 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. 106105		2. Name of Corporation OCEAN ROAD CONSULTING, INC.		
3. Street Address Principal Business Office 123 FARNUM AVENUE		City NORTH PROVIDENCE	State RI	Zip 02911-
4. Business Phone No. 4013536638		5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island COMPUTER CONSULTING.				
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Joan Overcash		Vice President Name		
Street Address Post Office Box 11394		Street Address		
City North Providence	State RI	Zip 02904	City	State Zip
Secretary Name Joan Overcash		Treasurer Name		
Street Address Post Office Box 11394		Street Address		
City North Providence	State RI	Zip 02904	City	State Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Joan Overcash		Director Name		
Street Address Post Office Box 11394		Street Address		
City North Providence	State RI	Zip 02904	City	State Zip
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series Par Value
1,000 NO PAR VALUE			None	

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MAR 02 2009
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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 Joan Overcash Date 2/23/09
Print or Type Name
Joan Overcash
Title
President