



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.<br>98430   |             | 2. Name of Corporation<br>Sullivan & Sullivan, Professional Corporation |                         |              |   |                        |                    |
| 3. Street Address Principal Business Office<br>1130 Ten Rod Road, B206   |             | City<br>North Kingstown   | State<br>RI             | Zip<br>02852 |   |                        |                    |
| 4. Business Phone No.<br>(401) 294-9556  |             | 5. State of Incorporation   |                         |              |   |                        |                    |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>To Engage in the Practice of Law  |             |   |                         |              |   |                        |                    |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |   |                         |              |   |                        |                    |
| President Name<br>James C. Sullivan  |             | Vice President Name<br>Elizabeth F. Sullivan                            |                         |              |   |                        |                    |
| Street Address<br>1130 Ten Rod Road, B206  |             | Street Address<br>1130 Ten Rod Road, B206                               |                         |              |   |                        |                    |
| City<br>North Kingstown  | State<br>RI | Zip<br>02852  | City<br>North Kingstown | State<br>RI  | Zip<br>02852  |                        |                    |
| Secretary Name<br>James C. Sullivan  |             | Treasurer Name<br>Elizabeth F. Sullivan                                 |                         |              |   |                        |                    |
| Street Address<br>1130 Ten Rod Road, B206  |             | Street Address<br>1130 Ten Rod Road, B206                               |                         |              |   |                        |                    |
| City<br>North Kingstown  | State<br>RI | Zip<br>02852  | City<br>North Kingstown | State<br>RI  | Zip<br>02852  |                        |                    |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |   |                         |              |   |                        |                    |
| Director Name<br>James C. Sullivan   |             | Director Name   |                         |              |   |                        |                    |
| Street Address<br>1130 Ten Rod Road, B206  |             | Street Address  |                         |              |   |                        |                    |
| City<br>North Kingstown  | State<br>RI | Zip<br>02852  | City                    | State        | Zip   |                        |                    |
| Director Name  |             | Director Name   |                         |              |   |                        |                    |
| Street Address   |             | Street Address  |                         |              |   |                        |                    |
| City   | State       | Zip   | City                    | State        | Zip   |                        |                    |
| 9. SHARES AUTHORIZED<br>8,000 \$.01 Par Value  |             |   |                         |              | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                        |                    |
| 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<br>200   | Class/Series<br>Common | Par Value<br>\$.01 |
|  |             |   |                         |              |   |                        |                    |

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.

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: Date: 2-27-09  
James C. Sullivan  
Print or Type Name  
President  
Title

File Date **FILED**  
Check **MAR 02 2009**  
By **6923**  
FOR SECRETARY OF STATE USE ONLY