



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

1. Corporate ID No. 157199		2. Name of Corporation KISSICK FISHERIES, INC.			
3. Street Address Principal Business Office 52 TWIN LEAF TRAIL			City SAUNDERSTOWN	State RI	Zip 02874
4. Business Phone No. (401) 294-9104		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN ANY AND ALL FACETS OF THE COMMERCIAL FISHING INDUSTRY					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DOUGLAS KISSICK			Vice President Name MARY ANN KISSICK		
Street Address 52 TWIN LEAF TRAIL			Street Address 52 TWIN LEAF TRAIL		
City SAUNDERSTOWN	State RI	Zip 02874	City SAUNDERSTOWN	State RI	Zip 02874
Secretary Name MARY ANN KISSICK			Treasurer Name DOUGLAS KISSICK		
Street Address 52 TWIN LEAF TRAIL			Street Address 52 TWIN LEAF TRAIL		
City SAUNDERSTOWN	State RI	Zip 02874	City SAUNDERSTOWN	State RI	Zip 02874
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. 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 200	Class/Series COMMON	Par Value \$0.01 EA
			THIS SECTION MUST BE COMPLETED		

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	MAR 03 2009
Check No.	
By	By 1273
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.

Douglas Kissick
Signature

2-28-09
Date

DOUGLAS KISSICK

Print or Type Name

PRESIDENT

Title