

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

1. Corporate ID No.		2. Name of Corporation				
101273  3. Street Address Principal Bus	Watch H	Watch Hill Harbour House Apartments, Inc.				
1145 Main Street, Suite #3			Pawtucket	RI	02860	
401-728-1100 Rhode Island			•	· · · · · · · · · · · · · · · · · · ·		
6. Brief Description of the Cha.	*					
7. NAMES AND ADDRE	apartments SSES OF THE OFFIC	and related f ERS: ("X" BOX FOR ATTA	acilities <i>CHMENT</i> ) □ FILLIN	SPACES REFORE USING	ATTACHMENTS	
President Name			Vice President Name	DINGES BEI ONE COMIG	THE THEORIEST TO	
Carl Sisto			None			
Street Address 1145 Main Street, Suite #3			Street Address			
City Pawtucket	State RI	<sub>Хір</sub> 02860	Сиу	State	Zip	
Secretary Name	***************************************	***************************************	Treasurer Name	····		
Carl Sisto			Carl Sisto			
Street Address 1145 Main Street, Suite #3			Street Address 1145 Main Street, Suite #3			
Pawtucket	State RI	02860	City Pawtucket	State RI	<sup>Zip</sup> 02860	
8. NAMES AND ADDRE Director Name	SSES OF THE DIREC	TORS: ("X" BOX FOR ATI	TACHMENT) T FILL I Director Name	IN SPACES BEFORE USIN	G ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	<b>46</b>	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State		
9. SHARES AUTHORIZI	ED '	1	: 10. SHARES ISSUEI	 D <i>("X" BOX FOR ATTACI</i>		
1,000 No pa	ar value		ISSUED SHARES — THIS S	SECTION MUST BE COMPLETED	い。では	
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	
			100	Common	No par va	
	·					
		corporation by an authorize corporation by the receiver		corporation is in the hand	s of a receiver or trustee,	
uns report must be exec-	area on benan of the	corporation by the receiver	or trustee.			
			Under penalty of	perjury, I declare and affirm t	that I have examined this ran	
				companying schedules and sta		
FILE	= <b>D</b>			are true and correct.		
File Date	- <i>U</i>	_	/h	el Anto	3/2/09	
MAR OF			Signature		Date	

Check No. By: FOR SECRETARY OF STATE USE ONLY

including any accompanying schedules and s	· ·
contained herein are true and correct.	
Lack Anto	3/2/09
Signature	Date
Carl Sisto	
Print or Type Name	***
President	
Title	