

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

Providence, RI 02904-2615

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.

101.222.3040

| 1. Corporate ID No. 116507 | OCEANSI | 2. Name of Corporation OCEANSIDE REAL ESTATE DEVELOPMENT, INC. | | | | | | |
|---|--|--|--|---|----------------------|--|--|--|
| 3. Street Address Principal Business Office 118 Point Judith Road | | | City Narragansett | State RI | 2ip 02882 | | | |
| 4. Business Phone No. 5. State of Incorporation Rhode Island | | | | | | | | |
| 6. Brief Description of the Chara The acquisition, develop | cter of Business Conduc ment, operation a | ted in Rhode Island nd sale of real estate and th | ne performance of all acts | necessary | | | | |
| 7. NAMES AND ADDRESS President Name Joseph G. Formicola, | SES OF THE OFFI | CERS: ("X" BOX FOR ATTZ | ACHMENT) TELL IN S Vice President Name Jerry A. Sahagian | PACES BEFORE USING | ATTACHMENTS | | | |
| Street Address 118 Point Judith Road | | | Street Address 118 Point Judith Road | | | | | |
| Narragansett | RI | 21p 02882 | City Narragansett | State RI | 2ip 02882 | | | |
| Secretury Name Jerry A. Sahagian | | | Treasurer Name Joseph G. Formicola, Jr. | | | | | |
| Street Address 118 Point Judith Road | | | Street Address 118 Point Judith Road | | | | | |
| City: Narragansett | State RI | ^{Zip} 02882 | City Narragansett | State RI | ^{Zip} 02882 | | | |
| 8. NAMES AND ADDRESS **Director Name** Joseph G. Formicola, C. **Street Address** | | CTORS: ("X" BOX FOR AT | TACHMENT) FILL IN Director Name Jerry A. Sahagian Street Address | SPACES BEFORE USIN | G ATTACHMENTS | | | |
| 118 Point Judith Road | | | 118 Point Judith Roa | ad | | | | |
| Narragansett | State RI | 02882 | <i>сиу</i> Narragansett | State RI | Zip 02882 | | | |
| Director Name None | | | Director Name None | *************************************** | | | | |
| treet Address | | | Street Address | | | | | |
| City | State | Zip | Сііу | State | Zip | | | |
| 9. SHARES AUTHORIZED | | | 10. SHARES ISSUED (| ("X" BOX FOR ATTACE TION MUST BE COMPLETED | HMENT) | | | |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of | | | Number of Shares | Class/Series | Par Value | | | |
| instruction sheet. | additional filing. | See Section 9 of | L00 | Common | no par value | | | |

this report must be executed on behalf of the corporation by the receiver or trustee.

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| OR SECRE | TARY OF S | TATE US | E ONLY | , " " " | - |
| | FILE R 0 6 | FILED R 0 6 2009 OR SECRETARY OF S | FILED R 0 6 2009 OR SECRETARY OF STATE US | FILED R 0 6 2009 OR SECRETARY OF STATE USE ONLY | FILED R 0 6 2009 3 3 2 OR 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. 9/2009 Joseph G. Formicola, Jr. Print or Type Name President Title Form 630 Rev. 08/08