



and Providence Plantations
Office of the Secretary of State

Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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. 68914		2. Name of Corporation Newport Hobby House, Ltd.			
3. Street Address Principal Business Office 146 Broadway			City Newport	State RI	Zip 02840
4. Business Phone No. 401 847 1515		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island To conduct a retail store for the sale of hobby and craft items					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anne S. Damon			Vice President Name Kimball S. Damon		
Street Address 280 Indian Avenue			Street Address 146 Broadway		
City Middletown	State RI	Zip 02842	City Newport	State RI	Zip 02840
Secretary Name Anne S. Damon			Treasurer Name Peter S. Damon		
Street Address 280 Indian Avenue			Street Address 280 Indian Avenue		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anne S. Damon			Director Name Kimball S. Damon		
Street Address 280 Indian Avenue			Street Address 146 Broadway		
City Middletown	State RI	Zip 02842	City Newport	State RI	Zip 02840
Director Name Peter S. Damon			Director Name Peter S. Damon		
Street Address 280 Indian Avenue			Street Address 280 Indian Avenue		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 no par value			180		-0-

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

MAR 26 2009

File Date	By <u>P.S. Damon</u>
Check No.	<u>29-84806</u>
By:	
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.

Signature

PETER S. DAMON

Print or Type Name

Title

Treasurer

Date

January 4 2009