RI SOS Filing Number: 200944719190 Date: 03/30/2009 4:00 PM

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St
Providence, RI 02904-2611
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.	2. Name of Corporation			
2704	BOWDOIN REALTY			
3. Street Address Principal Business Office		City	State	Zip
5 MEADOWBROOK DR		JOHNSTON	R.I.	02919
4. Business Phone No.	5. State of Incorporation			
401 949-5966	R.I.			

6. Brief Description of the Character of Business Conducted in Rhode Island

OWNER AN OPERATOR OF REAL ESTATE

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name: WILLIAM W JONAH	Vice President Name: WILLIAM W JONAH
Street Address: 5 MEADOWBROOK DR.	Street Address: 5 MEADOWBROOK DR
City: JOHNSTON State: RI Zip: 02919	City: JOHNSTON State: RI Zip: 02919
Secretary Name: SAME AS ABOVE	Treasurer Name: SAME AS ABOVE
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name: WILLIAM W JONAH	Director Name:
Street Address: 5 MEADOWBROOK DR	Street Address:
City: JOHNSTON State: RI Zip: 02919	City: State: Zip:
Director Name:	Director Name:
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:

9. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
2,000	COMM	NO PAR VALUE

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
200	COMMON	NONE

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.

[redacted]

[redacted]

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.

William W Jonah 3/30/09
Signature *Date*

WILLIAM W JONAH
Print or Type Name

PRESIDENT
Title

[redacted]

File Date **FILED**

Check MAR 30 2009

By: By 32068 4357210 5297

FOR SECRETARY OF STATE USE ONLY

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