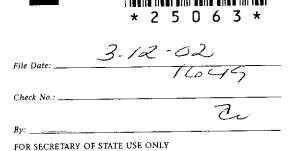


Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 ling Period: Ignuary 1-March 1 • Filing Fee: \$50.00

Filling Felioa. Junuary	1 1/2 1/2 1/2 1					
(FORM MUST BE TYPED IN BLA	CK)					
1. Corporate ID No.	2. Name of Corporati					
25063	JOHNSTON & BLACKWOOD SAILMAKERS, INC.					
3. Street Address Principal Business	Office		City	State	Zip	
1 Division Street	•		Warwick	RI	02818	
4. Business Phone No.		State of Incorporation	on		6. SIC Code 1883	
401-884-4227		RHODE ISLAN	ND		1603	
7. Brief Description of the Character	of Business Conducted in	ı Rhode İsland				
Yacht sail making 8. NAMES AND ADDRES President Name	SES OF THE OFFI	CERS ("X" BOX FOR ATT	ACHMENT) FILL IN SPACES BEF Vice President Name	ORE USING ATTA	CHMENTS	
Todd Johnston Street Address			Ruth Johnston Street Address			
67 Lake Drive			67 Lake Drive		a:-	
City	State	Zip	City	State	^{Zip} 02852	
North Kingstown Secretary Name	RI	02852	North Kingstown Treasurer Name	RΙ	02632	
Ruth Johnston			Todd Johnston			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. NAMES AND ADDRES	SSES OF THE DIRE	ECTORS ("X" BOX FOR A	ATTACHMENT) FILL IN SPACES B Director Name	EFORE USING AT	TACHMENTS	
Todd Johnston Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES			ISSUED SHARES	~ · · ·		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 COMM NO PAR VALUE			100		No par value	
•			•			

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and all statements contained herein are true and correct. Signature of Officer JOHNSTON 660 Print or Type Name of Officer PRESIDENT Title of Officer

Form 630 12/01