



Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

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1995

Corporate ID: _____ Annual Report for the year: _____

JOHNSTON & BLACKWOOD SAILMAKERS, INC.

Name of Corporation: _____

Business entity organized under the laws of the State of: RI Business Entity is (check one):

For foreign entity, address and telephone number of principal office: _____
[x] Business Corporation (See RIGL Chapter 7-1.1)
[] Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: () _____ Brief statement of the character of business conducted in Rhode Island:

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

24 Long Street
East Greenwich, RI 02818

Phone: (401) 884-4227

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Todd Johnston, 67 Lake Street, North Kingstown, RI 02852			
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Arthur Blackwood, 85 Harrison Street, Providence, RI 02909			
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Todd Johnston, 67 Lake Street, North Kingstown, RI 02852			
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Arthur Blackwood, 85 Harrison Street, Providence, RI 02909			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Todd Johnston, 67 Lake Street, North Kingstown, RI 02852			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Arthur Blackwood, 85 Harrison Street, Providence, RI 02909			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares 1,000 Class / Series Common Number of Shares 200 Class / Series Common

MAR 02 1995

By CP#30-6358

Date 2-28-95, 19

By: Todd Johnston
PRINT OR TYPE NAME OF OFFICER SIGNING
President
TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

PETER S. HAYDON
1050 MAIN STREET, SUITE 22
EAST GREENWICH RI 02818