



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2671  
401.222.304

# 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. 000130885	2. Name of Corporation Omega Mortgage Corp		
3. Street Address Principal Business Office 333 Boston Post Rd	City Sudbury	State MA	Zip 01776
4. Business Phone No. 978-443-3337	5. State of Incorporation Massachusetts		
5. Brief Description of the Character of Business Conducted in Rhode Island			

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

President Name Denise H. Bay	Vice President Name				
Street Address 9 Farrington Ave	Street Address				
City Gloucester	State MA	Zip 01930	City	State	Zip

Secretary Name Denise H. Bay	Treasurer Name				
Street Address 9 Farrington Ave	Street Address				
City Gloucester	State MA	Zip 01930	City	State	Zip

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

Director Name Denise H. Bay	Director Name				
Street Address 9 Farrington Ave	Street Address				
City Gloucester	State MA	Zip 01930	City	State	Zip

Director Name	Director Name				
Street Address	Street Address				
City	State	Zip	City	State	Zip

## 9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

10,000. No Par Value

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

ISSUED SHARES — THIS SECTION **MUST** BE COMPLETED

Number of Shares	Class/Series	Par Value
2000	PWP	209,000
200	CLP	\$0.00

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.

File Date	By
Check No.	
By	
FOR SECRETARY OF STATE USE ONLY	

FILED

JUN 23 2009

6/22/09

9:19

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 Denise H. Bay	Date 6/22/09
Print or Type Name President	
Title	