



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 02904-2615  
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.<br><b>21322</b>                                                                                                                        |                              | 2. Name of Corporation<br><b>Romuald Potvin &amp; Son Funeral Home, Inc.</b> |                                                                     |                              |                                  |
| 3. Street Address Principal Business Office<br><b>45 Curson Street</b>                                                                                     |                              | City<br><b>West Warwick</b>                                                  | State<br><b>Rhode Island</b>                                        | Zip<br><b>02893</b>          |                                  |
| 4. Business Phone No.<br><b>(401) 821-6868</b>                                                                                                             |                              | 5. State of Incorporation<br><b>Rhode Island</b>                             |                                                                     |                              |                                  |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br><b>Funeral Directing &amp; Embalming</b>                                    |                              |                                                                              |                                                                     |                              |                                  |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |                              |                                                                              |                                                                     |                              |                                  |
| President Name<br><b>Peter B. Cotter</b>                                                                                                                   |                              | Vice President Name<br><b>Madeleine T. Cotter</b>                            |                                                                     |                              |                                  |
| Street Address<br><b>84 Port Circle</b>                                                                                                                    |                              | Street Address<br><b>84 Port Circle</b>                                      |                                                                     |                              |                                  |
| City<br><b>Warwick</b>                                                                                                                                     | State<br><b>Rhode Island</b> | Zip<br><b>02889</b>                                                          | City<br><b>Warwick</b>                                              | State<br><b>Rhode Island</b> | Zip<br><b>02889</b>              |
| Secretary Name<br><b>Madeleine T. Cotter</b>                                                                                                               |                              | Treasurer Name<br><b>Peter B. Cotter</b>                                     |                                                                     |                              |                                  |
| Street Address<br><b>84 Port Circle</b>                                                                                                                    |                              | Street Address<br><b>84 Port Circle</b>                                      |                                                                     |                              |                                  |
| City<br><b>Warwick</b>                                                                                                                                     | State<br><b>Rhode Island</b> | Zip<br><b>02889</b>                                                          | City<br><b>Warwick</b>                                              | State<br><b>Rhode Island</b> | Zip<br><b>02889</b>              |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |                              |                                                                              |                                                                     |                              |                                  |
| Director Name<br><b>Peter B. Cotter</b>                                                                                                                    |                              | Director Name<br><b>(none)</b>                                               |                                                                     |                              |                                  |
| Street Address<br><b>84 Port Circle</b>                                                                                                                    |                              | Street Address<br><b>(none)</b>                                              |                                                                     |                              |                                  |
| City<br><b>Warwick</b>                                                                                                                                     | State<br><b>Rhode Island</b> | Zip<br><b>02889</b>                                                          | City<br><b>(none)</b>                                               | State<br><b>(none)</b>       | Zip<br><b>(none)</b>             |
| Director Name<br><b>Madeleine T. Cotter</b>                                                                                                                |                              | Director Name<br><b>(none)</b>                                               |                                                                     |                              |                                  |
| Street Address<br><b>84 Port Circle</b>                                                                                                                    |                              | Street Address<br><b>(none)</b>                                              |                                                                     |                              |                                  |
| City<br><b>Warwick</b>                                                                                                                                     | State<br><b>Rhode Island</b> | Zip<br><b>02889</b>                                                          | City<br><b>(none)</b>                                               | State<br><b>(none)</b>       | Zip<br><b>(none)</b>             |
| 9. SHARES AUTHORIZED<br><b>8,000 NO PAR VALUE</b>                                                                                                          |                              |                                                                              | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                              |                                  |
| 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. |                              |                                                                              | ISSUED SHARES — THIS SECTION MUST BE COMPLETED                      |                              |                                  |
|                                                                                                                                                            |                              |                                                                              | Number of Shares<br><b>80 Shares</b>                                | Class/Series                 | Par Value<br><b>No Par Value</b> |
|                                                                                                                                                            |                              |                                                                              |                                                                     |                              |                                  |

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                       | <b>FILED</b>       |
| Check No.                       | <b>JUL 01 2009</b> |
| By:                             | <b>By 093635</b>   |
| 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.

**Peter B. Cotter** 6/15/2009  
Signature Date  
Peter B. Cotter  
President  
Title

22:3 PM 1-706 6000  
RECEIVED  
CORPORATIONS DIV  
STATE OF RHODE ISLAND