

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(ccrd)) is

subject to a penalty fee of \$25.	00.		1	-		
1. Corporate ID No. 14969		2. Name of Corporation Visitor Printing Company				
3. Street Address Principal Bu One Cathedral Squ				State RI	^{Zip} 02903	
4. Business Phone No. 401-272-1010 5. State of Incorporation Rhode Island						
6. Brief Description of the Chi Printing weekly dioces	san newspaper					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Most Reverend Thomas J. Tobin			CHMENT) _ FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Rev. Msgr. Paul D. Theroux			
itreet Address One Cathedral Square			Street Address One Cathedral Square			
City Providence	State RI	^{Zip} 029 03	City Providence	State RI	^{Zip} 02903	
Secretary Name Michael Guilfoyle			Treasurer Name Michael Guilfoyle			
Street Address One Cathedral Square			Street Address One Cathedral Square			
City Providence	State RI	^{Zip} 02903	City Providence	State RI	^{Zip} 02903	
8. NAMES AND ADDR Director Name Most Reverend Tho		CTORS CON BOX FOR A	TACHMENT) THE T Director Name Rev. Msgr. Paul D.	40.00mm - 100.00mm - 1	C ATTACHMENTS	
Street Address One Cathedral Square			Street Address One Cathedral Square			
City Providence Director Name	State RI	^{Zip} 02903	City Providence Director Name	State RI	zip 02903	
Michael Guilfoyle Street Address One Cathedral Squ	are		Street Address			
City Providence	State RI	^{Zip} 02903	City	State	Zip	
9. SHARES AUTHORE	330) ("X" BOX FOR ATTAC ECTION <u>MUST</u> BE COMPLETED	Control of the Contro	
		he Office of the Secretary of	l .	Class/Series	Par Value	
State. Changes requir instruction sheet.	e an additional filing	. See Section 9 of	130	Common Caron Music De C	No par value	
		he corporation by an authori		corporation is in the hand	Is of a receiver or trustee,	

FILED	Under penalty of perjury, I declare and affin	rm that I have examined this report.
	including any accompanying schedules and	g statements, and that all statements
File Date By	91:01 HV Z-701 600 Egnature	6/30/07 Date
Check No.	AID SNO! IV BOUND Michael Guilfoyle OF A LTO BOUND Print or Type Name	
	Print or Type Name	
FOR SECRETARY OF STATE USE ONLY	<u> </u>	
	Title	Form 630 Rev. 08/08