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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 2007

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	2. Name of Corporation			
145959	The Skyline Group, Inc			
3. Street Address Principal Business Office	65 Paine Street	City Uxbridge	State Ma	Zip 01569
4. Business Phone No.	508-254-4718	5. State of Incorporation	Massachusetts	

6. 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	Street Address	City	State	Zip
	John E Higgins	65 Paine Street	Uxbridge	Ma	01569
	Vice President Name	Street Address	City	State	Zip
	John E Higgins	65 Paine Street	Uxbridge	Ma	01569
	Secretary Name	Street Address	City	State	Zip
	John E Higgins	65 Paine Street	Uxbridge	Ma	01569
	Treasurer Name	Street Address	City	State	Zip
	John E Higgins	65 Paine Street	Uxbridge	Ma	01569

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

	Director Name	Street Address	City	State	Zip
	John E Higgins	65 Paine Street	Uxbridge	Ma	01569
	Director Name	Street Address	City	State	Zip
	Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

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.

Number of Shares	Class/Series	Par Value
30,000	CNP	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.

[redacted]

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CORPORATIONS DIV

[redacted]

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.

John E Higgins 7/6/09

Signature *Date*

John E Higgins

Print or Type Name

President

Title

Form 630 Rev. 08/08

35778-5-358723