



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 2000

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)(2)) is subject to a penalty fee of \$25.00.

| | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------|---------------------|
| 1. Corporate ID No. | | 2. Name of Corporation WHALE ROCK LAND COMPANY | | | |
| 3. Street Address Principal Business Office 133 Old Tower Hill Road, Ste. 1 | | | City Wakefield | State RI | Zip 02879 |
| 4. Business Phone No. 789-0217 | | 5. State of Incorporation Delaware | | | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island Real Estate | | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Anita C. Hovey | | | Vice President Name Dorothy Robinson | | |
| Street Address Whale Rock Point | | | Street Address Whale Rock Point | | |
| City Narragansett | State RI | Zip 02882 | City Narragansett | State RI | Zip 02882 |
| Secretary Name Harold d'O. Baker | | | Treasurer Name Benjamin Hovey | | |
| Street Address Whale Rock Point | | | Street Address Whale Rock Point | | |
| City Narragansett | State RI | Zip 02882 | City Narragansett | State RI | Zip 02882 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name NONE | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 9. SHARES AUTHORIZED 100 Common No Par | | | 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 100 | Class/Series Common | Par Value No Par |
| | | | | | |

RECEIVED STATE SECRETARY OF CORPORATIONS DIV
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2009 JUL 15 PM 3:05

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.

FILED

File Date JUL 20 2009 10:04
Check No. By 094860 AM
By: K.M.C.


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.

Winifred B Mackall 6-18-09
Signature Date
Winifred B. Mackall
Print or Type Name
Secretary
Title

SECRETARIAL CERTIFICATE

I, WINIFRED MACKALL, of 31 Gibson Avenue, Narragansett, Rhode Island, do hereby certify that I am the present Secretary of Whale Rock Land Company and that the attached annual report for Whale Rock Land Company accurately reflects the officers that held those positions for that year. I also further certify that the persons serving as Secretary for the year of this annual report is not available for the purpose of signing this annual report. The names of the officers were obtained by me from the records of the corporation.


Winifred Mackall

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