



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>104864                                                                                                                              |             | 2. Name of Corporation<br>GREENWAY GOLF TECHNOLOGIES, INC. |                                                                     |              |              |
| 3. Street Address Principal Business Office<br>10 Barbara Ann Drive                                                                                        |             |                                                            | City<br>No. Providence                                              | State<br>RI  | Zip<br>02911 |
| 4. Business Phone No.<br>(401) 232-3252                                                                                                                    |             | 5. State of Incorporation<br>Rhode Island                  |                                                                     |              |              |
| 6. Brief Description of the Character of Business Conducted in Rhode Island - Manufacture, distribution, and sales of recreation and golf equipment.       |             |                                                            |                                                                     |              |              |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |                                                            |                                                                     |              |              |
| President Name<br>Anthony Lombardi                                                                                                                         |             |                                                            | Vice President Name<br>None                                         |              |              |
| Street Address<br>10 Barbara Ann Drive                                                                                                                     |             |                                                            | Street Address                                                      |              |              |
| City<br>No. Providence                                                                                                                                     | State<br>RI | Zip<br>02911                                               | City                                                                | State        | Zip          |
| Secretary Name<br>Anthony Lombardi                                                                                                                         |             |                                                            | Treasurer Name<br>None                                              |              |              |
| Street Address<br>10 Barbara Ann Drive                                                                                                                     |             |                                                            | Street Address                                                      |              |              |
| City<br>No. Providence                                                                                                                                     | State<br>RI | Zip<br>02911                                               | City                                                                | State        | Zip          |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |                                                            |                                                                     |              |              |
| Director Name<br>Anthony Lombardi                                                                                                                          |             |                                                            | Director Name<br>None                                               |              |              |
| Street Address<br>10 Barbara Ann Drive                                                                                                                     |             |                                                            | Street Address                                                      |              |              |
| City<br>No. Providence                                                                                                                                     | State<br>RI | Zip<br>02911                                               | City                                                                | State        | Zip          |
| Director Name                                                                                                                                              |             |                                                            | Director Name                                                       |              |              |
| Street Address                                                                                                                                             |             |                                                            | Street Address                                                      |              |              |
| City                                                                                                                                                       | State       | Zip                                                        | City                                                                | State        | Zip          |
| 9. SHARES AUTHORIZED                                                                                                                                       |             |                                                            | 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 <b>MUST</b> BE COMPLETED               |              |              |
|                                                                                                                                                            |             |                                                            | Number of Shares                                                    | Class/Series | Par Value    |
|                                                                                                                                                            |             |                                                            | 10,000 No Par                                                       | One Class    | No par val.  |
|                                                                                                                                                            |             |                                                            | Value                                                               |              |              |

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.

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.

*Anthony Lombardi* 09-25-09  
Signature Date

Anthony Lombardi  
Print or Type Name

President  
Title

|                                 |              |
|---------------------------------|--------------|
| <b>FILED</b>                    |              |
| File Date                       | OCT 09 2009  |
| Check No.                       | By <i>DS</i> |
| By:                             | 10-31        |
| FOR SECRETARY OF STATE USE ONLY |              |

**ANNUAL MEETING OF**  
**GREENWAY GOLF TECHNOLOGIES, INC.**

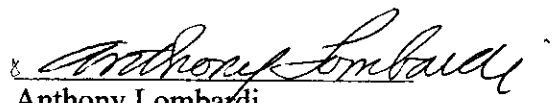
The annual meeting of the incorporators of Greenway Golf Technologies, Inc. was duly called to order at 10 Barbara-Ann Drive, North Providence, Rhode Island 02911, on September 18, 2009 at 2:00 p.m. for the purposes of adopting an annual report to the Secretary of State and for the transactions of such other business as may come before the meeting in accordance with the corporations' By-Laws.

VOTED: That, all shareholders being present, the shareholders waive notice of this meeting, and unanimously consent to the meeting being held on September 18, 2009, and the time affixed for said meeting and the By-Laws be waived.

VOTED: That the annual report of the year 2009 is adopted.

VOTED: The name of the corporation is changed to Greenway, Inc.

VOTED: Said meeting was adjourned at 2:40 p.m.

  
Anthony Lombardi  
President