



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 2010

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. 82404		2. Name of Corporation Chester's Inc.			
3. Street Address Principal Business Office 102 PUTNAM PK.			City HARMONY	State R.I	Zip 02829
4. Business Phone No. 401-949-1846		5. State of Incorporation Rhode ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William J. Hamill			Vice President Name ANN MARIE DeSesto		
Street Address 1236 PUTNAM PK			Street Address 99 BUNGY RD.		
City Chepachet	State RI	Zip 02814	City N. Scituate	State RI	Zip 02857
Secretary Name BARBARA HAMILL			Treasurer Name BARBARA ROYER		
Street Address P.O. Box 524 37 IDE RD.			Street Address 37 IDE RD		
City Chepachet	State RI	Zip 02814	City Chepachet	State RI	Zip 02814
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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			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 1950	Class/Series COMMON	Par Value N PAR 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.

Barbara Hamill 1/3/10
Signature Date
BARBARA HAMILL
Print or Type Name
Secretary
Title

File Date **FILED**
Check No. **JAN 05 2010**
By: **20201**
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