



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

1. Corporate ID No. 2128		2. Name of Corporation Beachcomber Real Estate Agency INC.			
3. Street Address Principal Business Office 10 Winnapaug Road		City Westerly	State R.I.	Zip 02891	
4. Business Phone No. 401-348-8669		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Real Estate sales and Property Management					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michelle M. Vacca			Vice President Name Michelle M. Vacca		
Street Address 10 Winnapaug Road			Street Address 10 Winnapaug Road		
City Westerly	State R.I.	Zip 02891	City Westerly	State R.I.	Zip 02891
Secretary Name Michelle M. Vacca			Treasurer Name Michelle M. Vacca		
Street Address 10 Winnapaug Road			Street Address 10 Winnapaug Road		
City Westerly	State R.I.	Zip 02891	City Westerly	State R.I.	Zip 02891
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Deborah Keindl			Director Name		
Street Address 93 Springdale Road			Street Address		
City Wethersfield	State CT.	Zip 06109	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) ☐		
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 100	Class/Series common	Par Value no par

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.

File Date	1-05-2010
Check No.	008990
By:	mnc
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.

Signature: Michelle M. Vacca Date: 1/4/10
Print or Type Name: Michelle M. Vacca
Title: President