

FOR SECRETARY OF STATE LISE OFFI

A. Ralph Mollis, Secretary of S Corporations Divi: 148 W. River St

Providence, RI 02904-2 401.222.30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010 - 401.222.

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. 7-1.2-1	501(c&d)) is subject to	a penalty fee of \$25.00.				
. Corporate ID No.	2. Name of Corporat.	ion				
109611		Rhody Pai	nting, Inc.			
Street Address Principal Busines	Office		City	State	Zip	
83 Old River			Lincoln	RI	02865	
Business Phone No. 5. State of Incorpora 401-334-8570			Rhode Island			
Brief Description of the Characte Painting and	r of Business Conducted in wallpaperin	n Rhode Island ng of both c	ommercial and	residential re	al estate	
. NAMES AND ADDRESSE	S OF THE OFFICER	S: ("X" BOX FOR AT	TACHMENT) TILL IN	SPACES BEFORE USING	ATTACHMENTS	
resident Name			Joseph McVeigh			
Joseph McVeigh			Street Address			
tree: Address			83 Old River Road			
83 Old River		7-	: 83 Old Ri	ver Road State	Ζιρ	
ity	State	02865	Lincoln	RI	02865	
Lincoln	RI	02003	Treasurer Name		4	
ecretary Name Joseph McVeigh				Joseph McVeigh		
reer Address 83 Old River Road			Street Address 83 Old River Road			
		77		State	Zip	
uy Lincoln	State RI	02865	Lincoln	RI	02865	
NAMES AND ADDRESSES		1	•	SPACES BEFORE USING	ATTACHMENTS	
rector Name	Or THE DIRECTOR	S. (A DOXIONA	Director Name	CARA BALLERANY NAMES AND LOCAL	Marine 12 22 1	
NovE						
reet Address			Street Address			
O'	State	Zip	City	State	Zip	
rector Name			Director Name			
				<u> </u>		
eet Address			Street Address			
ν	State	Zip	: : City	State	Zip	
,	June	2.49		5,4,10		
SHARES AUTHORIZED (".	X" BOX FOR ATTAC	 CHMENT) []	i 10. SHARES ISSUED	("X" BOX FOR ATTACHS	HENT)	
THORIZED SHARES			ISSUED SHARES			
mber of Shares (Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1000	no par val	ue	50	common	none	
	~					
	·					
is report must be executed o	n behalf of the corpo	oration by an authorize	d representative. If the co	rporation is in the hands of	f a receiver or trustee,	
report must be executed on	behalf of the corpo	ration by the receiver o	or trustee.			
			Under penalty of per	rjury, I declare and affirm that	I have examined this report	
			including any accom	panying schedules and statem	nents, and that all statement	
בוו בה			contained herein are	Aue and correct.	A. 10	
Date FILED			Joseph 4. Millerich 1-7-2010			
ck No. JAN 0 8 2010			Signatura	· / · · · · · · · · · · ·	Date	
By 2922	2 0		Joseph McV	eigh		
- J.	1		Print or Type Name			

Print or Type Name

President