



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 02904-2611
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. 155856		2. Name of Corporation LINDEN PARK PUBLISHERS, LTD		
3. Street Address Principal Business Office 51 BATEMAN AVENUE				City NEWPORT
4. Business Phone No. 401-849-2200		5. State of Incorporation RI		
6. Brief Description of the Character of Business Conducted in Rhode Island PUBLISHING				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name MICHAEL M. DUTTON		Vice President Name CAROL L. DUTTON		
Street Address 51 BATEMAN AVENUE		Street Address 51 BATEMAN AVENUE		
City NEWPORT	State RI	Zip 02840	City NEWPORT	Zip 02840
Secretary Name CAROL L. DUTTON		Treasurer Name CAROL L. DUTTON		
Street Address 51 BATEMAN AVENUE		Street Address 51 BATEMAN AVENUE		
City NEWPORT	State RI	Zip 02840	City NEWPORT	Zip 02840
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 NONE		
Street Address		Street Address		
City	State	Zip	City	Zip
Director Name NONE		Director Name NONE		
Street Address		Street Address		
City	State	Zip	City	Zip
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
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 NO PAR VALUE	Class/Series COMMON	Par Value NO PAR VALUE
		ISSUED: 20		

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 **JAN 22 2010**

Check No. _____

By: **439**

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: *Michael M. Dutton* Date: 1/19/10

Print or Type Name: **MICHAEL M. DUTTON**

Title: **PRESIDENT**