



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. 249828		2. Name of Corporation ROUND POND DEVELOPMENT CORPORATION			
3. Street Address Principal Business Office 12 CLOCK TOWER PLACE SUITE 200			City MAYNARD	State MA	Zip 01754
4. Business Phone No. 978-823-8200		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE DEVELOPMENT					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name THOMAS ZACCAGNINO			Vice President Name		
Street Address 12 CLOCK TOWER PLACE SUITE 200			Street Address		
City MAYNARD	State MA	Zip 01754	City	State	Zip
Secretary Name FRANK W TESSITORE			Treasurer Name ROBERT BUONATO		
Street Address 76 BEDFORD STREET SUITE 38			Street Address 12 CLOCK TOWER PLACE SUITE 200		
City LEXINGTON	State MA	Zip 02420	City MAYNARD	State MA	Zip 01754
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name THOMAS ZACCAGNINO			Director Name		
Street Address 12 CLOCK TOWER PLACE SUITE 200			Street Address		
City MAYNARD	State MA	Zip 01754	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 100	Class/Series CWP	Par Value \$0.01

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	FILED
Check No.	JAN 28 2010
By:	By 11043
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 THOMAS ZACCAGNINO Date 1/13/10
Print or Type Name
PRESIDENT
Title