

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

4
Filling Period: January 1 - March 1 • Filling 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. 7-1.2-150).

subject to a penalty fee of \$25.	00	, , , , , , , , , , , , , , , , , , , ,		aays after the time prescribed by	law (R.I.G.L. 7-1.2-1501(c&d)
1. Corporate ID No. 160999	2. Name of Co Fogland F	2. Name of Corporation Fogland Farm, Inc.			
3. Street Address Principal Bu. 958 Neck Rd.	siness Office		City Tiverton	State RI	Zip
4. Business Phone No. 5. State of Incorporation (508) 324-4450 Rhode Island		Tiverton	RI	02878	
6. Brief Description of the Cha horse farm	racter of Business Cond				
. NAMES AND ADDRE	SSES OF THE OFF	ICERS: ("X" BOX FOR ATT	A <i>CHMENT</i>) □ FILL IN	SPACES BEFORE USING	0. 47
resideni Name Martha Taradash			Vice President Name None	DILORD COIN	3 AI IACHMENIS
reet Address 158 Neck Rd.			Street Address		
ity Fiverton	State RI	Zip 02878	City	State	Zip
ecretary Name Nartha Taradash			Treasurer Name Martha Taradash		
ireet Address 958 Neck Rd.			Street Address 958 Neck Rd.		
verton	State	Zip	City	State	Zip
	RI SSES OF THE DIRI	02878 CTORS: ("X" ROX FOR AT	Tiverton	RI	02878
NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR AT irector Name Martha Taradash			TACHMENT) THIL IN SPACES BEFORE USING ATTACHMENTS Director Name None		
reel Address 58 Neck Rd.			Street Address		
y	State	Zip	City	State	· · · · · · · · · · · · · · · · · · ·
verton ector Name	RI	02878	*	State	Zip
one			Director Name None		
eet Address			Street Address		
,	State	Zip	City	State	Zip
SHARES AUTHORIZEI	о I 	f	10. SHARES ISSUED	("X" BOX FOR ATTACE	HMENT) []
his information is currently of record in the Office of the Secretary of tate. Changes require an additional filing. See Section 9 of struction sheet.			Number of Shares	Class/Series	Par Value
			100	Common	\$1 Par
1,000 Common \$1 Par					
Date FILEE	ed on behalf of the	e corporation by an authorize corporation by the receiver of	Under penalty of princluding and accordanced receip a signature Martha Tara	erjury, I declare and affirm to impanying schedules and state the and coffect.	hot I have a way in a late
By SECRETARY OF	THE DE DATE		Print or Type Name President		
TON SECRETARY OF	STATE USE ONLY		Title		