

A. Raiph 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 **Hilling Period: January 1 - March 1 - Filling Feet \$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 refining to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(ecrel)) is subject to a penalty fee of \$25.00.

| 1. Corporate ID No. 98964 | 2. Name of Co. BON Inve | 2. Name of Corporation BON Investment Services, Inc. | | | | |
|--|----------------------------|---|--|---------------------------|------------------------------|--|
| 3. Street Address Principal Business Office 500 West Main Rd | | | City Middletown | Sale RI | <i>zφ</i> 02842 | |
| 4. Business Phone No. 5. State of Incorporate 4018463400 Rhode Island | | 5. State of Incorporation Rhode Island | | | | |
| | e intangible invest | iments; collecting and distribu | | | | |
| 7. NAMES AND ADDRE President Name Thomas W. Kelly | SSES OF THE OFF | ICERS: ("X" BOX FOR ATTA | CHMENT) TILL IN S Vice President Name Sandra J. Pattie | SPACES BEFORE USING | ATTACHMENTS | |
| Street Address 500 West Main Rd | | | Street Address 500 West Main Rd | | | |
| োদ Middletown | State RI | дь 02842 | City Middletown | State RI | <i>24</i> р 02842 | |
| Secretary Nama Dennis H. McNamara | | | Trecturer Name Gregory Derderian | | | |
| Street Address 500 West Main Rd | | | Street Address 500 West Main Rd | | | |
| city Middletown | Sicte RI | ^{Zip} 02842 | Gity Middletown | State RI | ^{Ζίρ} 02842 | |
| 8. NAMES AND ADDRE Director Name Gregory Derderian | SSES OF THE DIR | ECTORS: ("X" BOX FOR AT | TACHMENT) THE IN Director Name Peter Capodilupo | SPACES BEFORE USI | NG ATTACHMENTS | |
| Street Address 500 West Main Rd | | | Street Address 500 West Main Rd | | | |
| લ્લુ Middletown | State RI | Ζφ 02842 | cuy Middletown | Siale RI | <i>Zip</i> 02842 | |
| J. Timothy O'Reilly | | | Director Name Nei l P. Galvin | | | |
| Stront Address 500 West Main Rd | | | Street Address 500 West Main Rd | | | |
| City Middletown | State R1 | <i>χ_φ,</i> 02842 | City Middletown | State RI | 24p 02842 | |
| 9. SHARES AUTHORIZI | RD 19 April 4 y s 1 | in Christian da inches da ———————————————————————————————————— | | ("X" BOX FOR ATTAC | | |
| 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 | Class/Suries | Par Vehie | |
| | | | 10000 | common | \$1.00 | |
| | | | सहस्र व्यवस | | 7.1 | |
| This report must be executive many | cuted on behalf of | the corporation by an authorize | ed representative. If the | corporation is in the han | ds of a receiver or trustee, | |

this report must be executed on behalf of the corporation by the receiver or trustee.

| | FILED | |
|-----------|----------------------------|----------|
| File Date | | |
| | FEB 08 2010 | |
| Check No. | 3V2507 | 01/25 |
| Ву: | | <u> </u> |
| | FOR SECRETARY OF STATE USE | ONLY |

| Under penalty of perjury, I declar | e and affirm | that I have examined this read | | |
|------------------------------------|--------------|----------------------------------|--|--|
| including any accompanying sch | edules and s | tatements, and that all statemen | | |
| contained borein are true and cor | rect, | / / | | |
| Mann W. K | Olly | 1/25/10 | | |
| Signature | Ŧ | / Date | | |
| Thomas W. Kelly | • | | | |
| Print or Type Name | | | | |
| President | | | | |
| Title | | | | |
| | | Form 630 Rev. 08/08 | | |