



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. 9762		2. Name of Corporation Garnac Company, Inc.			
3. Street Address (Principal Business Office) 155 South Main Street			City Providence	State RI	Zip 02903
4. Business Phone No.		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Owners and lessors of real estate					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gardner L. Grant			Vice President Name Ellen P. Grant		
Street Address 4 Pond View West			Street Address 4 Pond View West		
City Purchase	State NY	Zip 10577	City Purchase	State NY	Zip 10577
Secretary Name Ellen P. Grant			Treasurer Name Gardner L. Grant		
Street Address 4 Pond View West			Street Address 4 Pond View West		
City Purchase	State NY	Zip 10577	City Purchase	State NY	Zip 10577
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Gardner L. Grant			Director Name Ellen P. Grant		
Street Address 4 Pond View West			Street Address 4 Pond View West		
City Purchase	State NY	Zip 10577	City Purchase	State NY	Zip 10577
Director Name Gardner L. Grant, Jr.			Director Name		
Street Address 7 Sunnside Lane			Street Address		
City Westport	State CT	Zip 06880	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 500	Class Series Common	Par value No Par

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: FEB 16 2010

Check No. 111085

BY: [Signature]

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] 2/8/10

Signature: Gardner L. Grant Date: 2/8/10

Print or Type Name: Gardner L. Grant

Title: President

RECEIVED
CORPORATIONS DIV
STATE OF RHODE ISLAND
FEB 16 AM 11:51