

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

2010 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-subject to a penalty fee of \$25.00.	1501(e), each corporaii	ion failing or refusing to file its annu	al report within thirty (30) do	ays after the time prescribed by law	(R.I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No. 10296	2. Name of Corporation Thurston Sails, Inc.				
3. Street Address Principal Business Office 112 Tupelo Street			City Bristol	State RI	^{Zip} 02809
4. Business Phone No. 5. State of Incorporation Rhode Island					
6. Brief Description of the Character Sail and canvas manufactu	rer				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Steven K. Thurston			CHMENT)		
Street Address 9 Tall Pines Drive			Street Address		
City Barrington	State RI	^{Zip} 02806	City	State	Zip
Secretary Name Steven K. Thurston			Treusurer Name Steven K. Thurston		
Street Address 9 Tall Pines Drive			9 Tall Pines Drive		
<i>сну</i> Barrington	State RI	^{Zip} 02806	City Barrington	State RI	02806
8. NAMES AND ADDRESSES Director Name Steven K. Thurston Street Address	OF THE DIRECT	TORS: ("X" BOX FOR ATT	ACHMENT) FILL I Director Name None Street Address	N SPACES BEFORE USING	ATTACHMENTS
9 Tall Pines Drive	State	Zip	City	State	Zip
Barrington	RI	02806			
Director Name None			Director Name NONE		
Street Address			Street Address		
City	State	Zip	Сйу	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 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	Class/Series	Par Value
			300	COMMON	No par value
This report must be executed	on behalf of the	corporation by an authorize	ed representative. If the	corporation is in the hands	of a receiver or trustee,
File Date	-2010		Under penalty of including any ac-	perjury, I declare and affirm the companying schedules and state are true and correct	that I have examined this reportements, and that all statements.
Check No			Steven K. Thurston Print or Type Name		