

1. Corporate ID No. 148872

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence. RI 02904-2615 401.222.3040

Zip

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

2. Name of Corporation K & J MANAGEMENT, INC.

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.

3. Street Address Principal Business Office 1 HILLCREST AVENUE			GREENVILLE	State RI	^{ZIp} 02828	
4. Business Phone No. (401) 226-1048		5. State of Incorporation RHODE ISLAND				
6. Brief Description of the Character of Business Conducted in Rhode Island PROPERTY MANAGEMENT SERVICES						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS						
JOELLE L. FOURNIER			Vice President Name KEVIN A. FOURNIER			
Street Address 1 HILLCREST AVENUE			Street Address 1 HILLCREST AVENUE			
GREENVILLE	State RI	<i>Хір</i> 02828	GREENVILLE	State RI	7ip 02828	
JOELLE L. FOURNIER			Treasurer Name			
Sircet Address 1 HILLCREST AVENUE			Street Address			
GREENVILLE	State RI	^{Ζίρ} 02828	City	State	Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
Director Name		Director Name				
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	СЦ	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	
			100	COMMON	NPV	
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.						
					at I have examined this report, ements, and that all statements	
FIL	ED	7		contained herein are true and correct.		
File Date		Solley	Joelle & fournier 2/18/10			
FEB 1 9 2010 Check No.						
GOELLE L. FOURNIER						
By:			Print or Type Name PRESIDENT			
FOR SECRETARY OF STA	ATE USE ONLY		Title		Form 630 Day 09/09	
					Form 630 Rev. 08/08	