



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Foreign Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

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.

**ANNUAL REPORT YEAR:** 2009

**1. Corporate ID No.** 000505811

**2. Name of Corporation** Highlands Override, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 15 RYE STREET, SUITE 305

City or Town: PORTSMOUTH

State: NH

Zip: 03801

Country: USA

**4. Business Phone No.**

**5. State of Incorporation**

State: DE

**6. Brief Description of the Character of Business Conducted in Rhode Island**

MARKETING AND OPERATION OF CONSUMER LOYALTY PROGRAMS

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL J CROSBY	15 RYE STREET, SUITE 305 PORTSMOUTH, NH 03801 USA
SECRETARY	GEOFFREY TABER	15 RYE STREET, SUITE 305 PORTSMOUTH, NH 03801 USA
DIRECTOR	OWEN W WELLS	LIBRA FOUNDATION THREE CANAL PLAZA P.O. BOX 17516 PORTLAND, ME 04112-8516 USA
DIRECTOR	OMER FOURNIER	10 SYDNEY STREET SAINT JOHN, NB E2L 4K1 CAN

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$0.01	1,000.00	100

**9. 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.**

**Signed this 1 Day of March, 2010 at 3:22:02 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By SARA N. MOPPIN  
Signature of Authorized Representative of the Corporation

ATTORNEY  
Title

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.**

Form No. 630  
Revised 09/07

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