



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

A. Ralph Mollis, Secretary of State  
Corporations Division  
118 W. River Street  
Providence, RI 02901-2615  
101.2.12.3010

**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(c), 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. Company ID No. 109592		2. Name of Corporation Farley and Associates Incorporated			
3. Street Address Principal Business Office 1443 Park Avenue			City Cranston	State RI	Zip 02920
4. Business Phone No. (401) 942-5625		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Medical Office					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David B. Farley			Vice President Name		
Street Address 9 Horizon Drive			Street Address		
City Cranston	State RI	Zip 02921	City	State	Zip
Secretary Name Maria Farley			Treasurer Name Maria Farley		
Street Address 9 Horizon Drive			Street Address 9 Horizon Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name David B. Farley			Director Name		
Street Address 9 Horizon Drive			Street Address		
City Cranston	State RI	Zip 02921	City	State	Zip
Director Name Maria Farley			Director Name		
Street Address 9 Horizon Drive			Street Address		
City Cranston	State RI	Zip 02921	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 <b>MUST</b> BE COMPLETED		
			Number of Shares	Class Series	Par Value
			1,000 Shares Authorized		No Par Value
			1,000 Shares Issued		No Par Value

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.

File Date **FILED**

Check No. **FEB 26 2010**

By 1428

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.

David B. Farley 2-17-10  
Signature Date  
David B. Farley  
Print or Type Name  
President  
Title