



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.<br>162520  |                       | 2. Name of Corporation<br>Genesis Communications, Inc. |   |                        |                     |
| 3. Street Address Principal Business Office<br>684 Warren Ave.   |                       |  | City<br>East Providence   | State<br>Rhode Island  | Zip<br>02914        |
| 4. Business Phone No.<br>401-808-8100  |                       | 5. State of Incorporation<br>RHODE ISLAND              |   |                        |                     |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>PUBLIC RELATIONS  |                       |  |   |                        |                     |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |                       |  |   |                        |                     |
| President Name<br>Michael Trainor  |                       |  | Vice President Name<br>None   |                        |                     |
| Street Address<br>20 Manning Drive   |                       |  | Street Address  |                        |                     |
| City<br>Barrington   | State<br>Rhode Island | Zip<br>02806   | City  | State                  | Zip                 |
| Secretary Name<br>Michael Trainor  |                       |  | Treasurer Name<br>Michael Trainor                                   |                        |                     |
| Street Address<br>20 Manning Drive   |                       |  | Street Address<br>20 Manning Drive                                  |                        |                     |
| City<br>Barrington   | State<br>Rhode Island | Zip<br>02806   | City<br>Barrington  | State<br>Rhode Island  | Zip<br>02806        |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |                       |  |   |                        |                     |
| Director Name<br>None  |                       |  | Director Name   |                        |                     |
| Street Address   |                       |  | Street Address  |                        |                     |
| City   | State                 | Zip  | City  | State                  | Zip                 |
| Director Name  |                       |  | Director Name   |                        |                     |
| Street Address   |                       |  | Street Address  |                        |                     |
| City   | State                 | Zip  | 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 <u>MUST</u> BE COMPLETED               |                        |                     |
|  |                       |  | Number of Shares<br>100   | Class/Series<br>Common | Par Value<br>\$0.01 |
|  |                       |  |   |                        |                     |

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                       | <b>FILED</b>   |
| Check No.                       | MAR 01 2010    |
| By:                             | By <u>1314</u> |
| 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 Michael Trainor Date 2-25-10  
Print or Type Name  
President  
Title