



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>34875   |             | 2. Name of Corporation<br>Seaview Station, Inc. |   |              |                  |
| 3. Street Address Principal Business Office<br>125 Steamboat Avenue  |             |   | City<br>North Kingstown   | State<br>RI  | Zip<br>02852     |
| 4. Business Phone No.<br>(401) 294-3361  |             | 5. State of Incorporation<br>RI                 |   |              |                  |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>Operation of a restaurant   |             |   |   |              |                  |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |   |   |              |                  |
| President Name<br>Donald G. Fraser   |             |   | Vice President Name<br>None   |              |                  |
| Street Address<br>1 Central Street   |             |   | Street Address  |              |                  |
| City<br>Narragansett   | State<br>RI | Zip<br>02882                                    | City  | State        | Zip              |
| Secretary Name<br>Donald G. Fraser   |             |   | Treasurer Name<br>Donald G. Fraser                                  |              |                  |
| Street Address<br>Same as above  |             |   | Street Address<br>Same as above                                     |              |                  |
| City   | State       | Zip   | City  | State        | Zip              |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |   |   |              |                  |
| Director Name<br>Donald G. Fraser  |             |   | Director Name   |              |                  |
| Street Address<br>Same as above  |             |   | 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 MUST BE COMPLETED                      |              |                  |
|  |             |   | Number of Shares  | Class/Series | Par Value        |
|  |             |   | 8,000   | Common       | \$1.00 par value |
|  |             |   | 1,000   | Common       | \$1.00 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                       | <b>FILED</b>    |
| Check No.                       | MAR 09 2010     |
| By:                             | By <u>10239</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.

Donald G. Fraser 2/18/10  
Signature Date

Donald G. Fraser  
Print or Type Name

President  
Title