



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. 87202		2. Name of Corporation NEB MANAGEMENT, CORP.			
3. Street Address Principal Business Office 1 LAGOON ROAD			City PORTSMOUTH	State RI	Zip 02871
4. Business Phone No. 401-683-4000		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE MANAGEMENT SERVICES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas C. Rich			Vice President Name		
Street Address One Lagoon Road			Street Address		
City Portsmouth	State RI	Zip 02871	City	State	Zip
Secretary Name David S. MacBain			Treasurer Name Steven Casella		
Street Address One Lagoon Road			Street Address One Lagoon Road		
City Portsmouth	State RI	Zip 02871	City Portsmouth	State RI	Zip 02871
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Thomas C. Rich			Director Name Steven Casella		
Street Address One Lagoon Road			Street Address One Lagoon Road		
City Portsmouth	State RI	Zip 02871	City Portsmouth	State RI	Zip 02871
Director Name David S. MacBain			Director Name		
Street Address One Lagoon Road			Street Address		
City Portsmouth	State RI	Zip 02871	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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 300	Class/Series Common	Par Value No Par

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.

FILED

File Date	MAR 24 2010
Check No.	BY 10798
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
Thomas C. Rich
Print or Type Name
President
Title