



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  
401.222.3010

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009**

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. 72361		2. Name of Corporation JACKIE SEA CHARTERS, INC.			
3. Street Address Principal Business Office 24			City WARWICK WAKEFIELD	State RI	Zip 02879
4. Business Phone No. (401) 789-0025		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE CHARTER BOAT SERVICES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Kenneth O. Court			Vice President Name Kenneth O. Court		
Street Address 24 Ministerial Road			Street Address 24 Ministerial Road		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Kenneth O. Court			Treasurer Name Kenneth O. Court		
Street Address 24 Ministerial Road			Street Address 24 Ministerial Road		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Kenneth O. Court			Director Name		
Street Address 24 Ministerial Road			Street Address		
City Wakefield	State RI	Zip 02879	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	common	no par value	100	common	no par value

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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 \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 By: \_\_\_\_\_  
 FOR SECRETARY OF STATE USE ONLY

FILED  
 MAR 30 2010  
 BY [Signature]  
 29-115108

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that the statements contained herein are true and correct.

Signature: [Signature] Date: 2/17/09  
 Kenneth O. Court  
 President