

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

401,222,3040

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No.	2. Name of Corporation						
27248	The Jonny	The Jonnycake Center, Inc.					
3. State of Incorporation	4. Corporate ac	ddress in Rhode Island - Street	Address	City	Zip		
Rhode Island	1231 King	stown Road		Peace Dale	02879		
5. Foreign corporation. Enter principal office address			City	State	Zip		
6. Brief Description of the char	acter of the affairs wh	ich are actually conducted in I	Phode Island				
7. NAMES AND ADDRE	SSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) [] FILL IN SPACE	S REFORE USING ATTA	CHMENTS		
President Name			Vice President Name				
Paul McDonald			H. Jefferson Melish				
Street Address			Street Address				
46 Kingfisher Road			74 Main Street				
City	State	Ζip	City	State	Zip		
Wakefield	RI	02879	Wakefield	RI	02879		
Secretary Name Brenda Senak			Treasurer Name Paul W. Mercer				
Street Address 59 Tupelo Road			Street Address 107 Ashton Avenue				
City	State	Zip	City	State	Zip		
South Kingstown	RI	02879	North Kingstown	RI	02852		
8. NAMES AND ADDRES	SSES OF THE DI	RECTORS: ("X" BOX FOR	ATTACHMENT) TILL IN SPACE	ES BEFORE USING ATTA	CHMENTS		
THE NUMBER OF DIRE	ECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL NO	OT BE LESS THAN THR	EE (3). R.I.G.L. 7-6-2.		
Director Name			Director Name				
Renny Serre			Christina Philippi				
Street Address			Street Address				
117F Sherman Road			34 Berry Hill Lane				
City	State	Zip	City	State	Zip		
Wakefield	RI	02879	Kingston	RI	02881		
Director Name			Director Name				
Eugenie Maine			Leigh A. Reposa				
Street Address			Street Address				
368 Gooseberry Road			52 Indian Trail				
City .	State	Zip	City	State	Zip		
South Kingstown	RI	02879	l Saunderstown	RI	02874		
9. REGISTERED AGENT	IN RHODE ISLA	ND			•		
This information is curren	tly of record in th	e Office of the Secretary of	of State. Changes require filing of I	Form 641 - RIGI 7.6.13	217 6 78		
			···				
This report n	nust be signed by	either the President, Vic	e President, Secretary, Assistant	Secretary, Treasurer, Rec	eiver or Trustee		

····	
File Date	FILED
Check No.	IUN 0 1 2010
By: By	<u> 26520 — </u>
	FOR SECRETARY OF STATE USE ONLY

27248

Under penalty of perjury, I declare and affirm the report, including any accompanying schedules and the report of the period of of	at I have examinated the statements, and	ned this that all
statements contained herein are true and correct.	5-20	- 201
lignature of Officer	Dat	e -
Paul McDonald		
Print or Type Name of Officer		
President		
Title of Officer		

Form 631 Rev. 09/17