



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. 18312		2. Name of Corporation WILSON'S INC.	
3. Street Address Principal Business Office 35 Brown Street		City North Kingstown	State RI
		Zip 02852	
4. Business Phone No. 401-294-9514		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island Retail Clothing Business			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name J. Paul Wilson		Vice President Name James S. Wilson	
Street Address 314 Potter Road		Street Address 49 Cherokee Lane	
City North Kingstown	State RI	City North Kingstown	State RI
		Zip 02852	
Secretary Name James S. Wilson		Treasurer Name Craig A. Wilson	
Street Address 49 Cherokee Lane		Street Address 65 Lantern Lane	
City North Kingstown	State RI	City North Kingstown	State RI
		Zip 02852	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name J. Paul Wilson		Director Name James S. Wilson	
Street Address 314 Potter Road		Street Address 49 Cherokee Lane	
City North Kingstown	State RI	City North Kingstown	State RI
		Zip 02852	
Director Name Craig A. Wilson		Director Name	
Street Address 65 Lantern Lane		Street Address	
City North Kingstown	State RI	City	State
		Zip	
9. SHARES AUTHORIZED 100 Common No Par Value		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	
		100	Common
			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.

File Date **FILED**

Check No. **AUG 25 2010**

By: **20748**

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.

J. Paul Wilson
Signature: J. Paul Wilson Date: 8/23/10

Print or Type Name
President

Title