



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 2011

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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 63028		2. Name of Corporation Sandlewood Associates Inc.	
3. Street Address Principal Business Office 1191 Post Road		City Warwick	State RI
		Zip 02888	
4. Business Phone No. (401) 467-3171		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name FRANK NERI		Vice President Name Joseph M. Neri	
Street Address 1006 Post Road		Street Address 1006 Post Road	
City Warwick	State RI	City Warwick	State RI
Zip 02888		Zip 02888	
Secretary Name Theresa Murphy		Treasurer Name Robert J. Neri	
Street Address 1006 Post Road		Street Address 1006 Post Road	
City Warwick	State RI	City Warwick	State RI
Zip 02888		Zip 02888	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name FRANK NERI		Director Name Robert J. Neri	
Street Address 1006 Post Road		Street Address 1006 Post Road	
City Warwick	State RI	City Warwick	State RI
Zip 02888		Zip 02888	
Director Name FRANK M. Neri		Director Name	
Street Address 1006 Post Road		Street Address	
City Warwick	State RI	City	State
Zip 02888		Zip	
9. SHARES AUTHORIZED			
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.			
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
ISSUED SHARES - THIS SECTION MUST BE COMPLETED			
Number of Shares 1600		Class/Series Common	Par Value No 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.

FILED

File Date: JAN 06 2011
 Check No. By: [Signature]
 1117
 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: [Signature] Date: _____
 Print or Type Name: FRANK NERI
 Title: PRESIDENT