



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
1-18 W. River Street
Providence, RI 02904-2615
(401) 222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

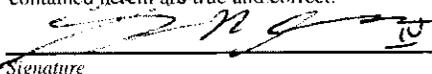
Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 87603		2. Name of Corporation Westerly Auto Body, Inc.			
3. Street Address Principal Business Office 74 School Street			City Westerly	State RI	Zip 02891
4. Business Phone No. 401 596-4163		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island The Sales of Automobiles at wholesale and retail					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Stiles M. Gilmore, IV			Vice President Name Stiles M. Gilmore, IV		
Street Address 79 Diamond Hill Road			Street Address 79 Diamond Hill Road		
City Bradford	State RI	Zip 02808	City Bradford	State RI	Zip 02808
Secretary Name Laura A. Scalise			Treasurer Name Laura A. Scalise		
Street Address 16 Estas Way			Street Address 16 Estas Way		
City Ashaway	State RI	Zip 02804	City Ashaway	State RI	Zip 02804
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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
			1,000 shares	Common	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.

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.

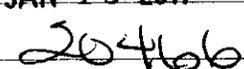
 _____
Signature Date 1/4/11

Stiles M. Gilmore, IV

Print or Type Name

President

Title

FILED	
File Date	_____
Check No.	JAN 13 2011
By:	
FOR SECRETARY OF STATE USE ONLY	