



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 02904-2611  
401.222.3041

# 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. 40363	2. Name of Corporation GIL PARKING CORPORATION		
3. Street Address Principal Business Office 1525 OLD LOUISQUISSET PIKE, SUITE B201	City LINCOLN	State RI	Zip 02865
4. Business Phone No. 401-726-3355	5. State of Incorporation RHODE ISLAND		

6. Brief Description of the Character of Business Conducted in Rhode Island  
PARKING LOT

## 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name JAMES F. DUGAN	Vice President Name				
Street Address 1525 OLD LOUISQUISSET PIKE, STE B201	Street Address				
City LINCOLN,	State RI	Zip 02865	City	State	Zip
Secretary Name	Treasurer Name				
Street Address	Street Address				
City	State	Zip	City	State	Zip

## 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name JAMES F. DUGAN	Director Name				
Street Address 1525 OLD LOUISQUISSET PIKE, STE B201	Street Address				
City LINCOLN,	State RI	Zip 02865	City	State	Zip
Director Name	Director Name				
Street Address	Street Address				
City	State	Zip	City	State	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) ☐

ISSUED SHARES --- THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	COMMON	\$1

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 FEB 11 2011  
Check No. By MNS  
By: 1849

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 James F. Dugan Date 2/7/11  
Print or Type Name JAMES F. DUGAN  
Title Investor