

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

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1. Corporate ID No. 13793	2. Name of Corporation STANLEY GRANITE COMPANY, INC.				
3. Street Address Principal Business Office 91 PAWTUCKET AVENUE			City RUMFORD	State RI	^{Zip} 02916
4. Business Phone No. 5. State of Incorporation RHODE ISLAND					
6. Brief Description of the Character of Retail business of furnishing			om lettering to order.		
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	<i>CHMENT)</i> 🔲 FILL IN SPACI	ES BEFORE USING ATT	ACHMENTS
President Name			Vice President Name		
DAVID E. CZERWONKA			JOHN S. CZERWONKA		
Street Address 2 PAWTUCKET AVENUE			Street Address 241 DON AVENUE		
City RUMFORD	State RI	^{Zip} 029 16	City RUMFORD	State RI	^{Zip} 02916
Secretary Name EDWARD S. CZERWONKA			Treasurer Name DAVID E. CZERWONKA		
Street Address 223 DON AVENUE			Street Address 2 PAWTUCKET AVENUE		
City RUMFORD	State RI	^{Zip} 02916	City RUMFORD	State RI	^{Zip} 02916
8. NAMES AND ADDRESSES	OF THE DIRECTORS	: ("X" BOX FOR ATT	ACHMENT) 🗌 FILL IN SPA	CES BEFORE USING AT	TACHMENTS
Director Name EDWARD S. CZERWONKA			Director Name JOHN S. CZERWONKA		
223 DON AVENUE			241 DON AVENUE		
City	State	Zip	City	State	Zip
RUMFORD	RI	02916	RUMFORD	RI	02916
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED		k Asileinnii Airliennna 1	10. SHARES ISSUED ("X" ISSUED SHARES — THIS SECTION	####	N 79 [] - [] - [] - []
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.			Number of Shares	Class/Series	Par Value
			100	COMMON	NONE
			par sent 0		
This report must be executed of	-	•		ation is in the hands of a	a receiver or trustee,

	FILED
File Date	EB 22 2011
Check No. By	mne
By:	013671
FOR SECRETA	ARY 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.
JAM (Chravenha 2-17-11
Signature Date
David E. Czerwonka
Print or Type Name
President
Title