



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

1. Corporate ID No. 40590		2. Name of Corporation EAST BAY PROPERTY MANAGEMENT SERVICES, INC.			
3. Street Address Principal Business Office 576 Metacom Avenue, Belltower Plaza, Unit 12		City Bristol	State RI	Zip 02809	
4. Business Phone No. (401) 253-3511		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island MANAGING RENTAL PROPERTY					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert G. Hollands			Vice President Name Robert G. Hollands		
Street Address 3 Juniper Court			Street Address 3 Juniper Court		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name Robert G. Hollands			Treasurer Name Robert G. Hollands		
Street Address 3 Juniper Court			Street Address 3 Juniper Court		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert G. Hollands			Director Name None		
Street Address 3 Juniper Court			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares		Class/Series		Par Value	
1,000		Common		No Par	
THIS SECTION MUST BE COMPLETED					

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 22 2011
Check No.	16469
By	
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
Robert G. Hollands
Print or Type Name
President
Title