



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. 121457		2. Name of Corporation S.J. Mill Company			
3. Street Address Principal Business Office 90 Elm Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-274-1550		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island To operate a grist mill and related activities					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Pauline C. Metcalf			Vice President Name		
Street Address 375 Mail Road			Street Address		
City Exeter	State RI	Zip 02822	City	State	Zip
Secretary Name Frank Mauran			Treasurer Name Esther E.M. Mauran		
Street Address 109 Benefit Street			Street Address 109 Benefit Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Frank Mauran			Director Name Esther E.M. Mauran		
Street Address 109 Benefit Street			Street Address 109 Benefit Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Director Name Pauline C. Metcalf			Director Name Richard Kenyon		
Street Address 375 Mail Road			Street Address 380 Tripps Corner Road		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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 200	Class/Series Common	Par Value .01

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

Pauline C. Metcalf

Print or Type Name

President

Title

File Date

FEB 28 2011

Check No.

By: **BY**

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