



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
and 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.**

*As amended with R.I.G.L. § 1.2-1501(c), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. § 1.2-1501(c)(4)) is subject to a penalty fee of \$25.00

1. Filing Fee 96717		2. Name of Corporation I.C. Management, Inc.		
3. Principal Business Office 320 THAMES ST./Box 984		City Newport	State RI	Zip 02840-0089
4. Filing Fee 401 3977427		5. State of Incorporation RI		
6. Assets and Liabilities of Business Conducted in Rhode Island ASSET HOLDING, CAPITAL MANAGEMENT AND LEASING				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Officer Name KATHLEEN BOLCON		Vice President Name SAME		
Street Address 18 ACRES OF PINE RD		Street Address		
City COUNTRY	State RI	Zip 02816	City	State
Officer Name SAME		Treasurer Name SAME		
Street Address		Street Address		
City	State	Zip	City	State
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name KATHLEEN BOLCON		Director Name NONE		
Street Address 18 ACRES OF PINE RD		Street Address		
City COUNTRY	State RI	Zip 02816	City	State
Director Name NONE		Director Name NONE		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares		Class/Series		Par Value
100		Common		No Par Value
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.				

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CORPORATIONS DIV
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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
FEB 28 2011

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
KATHLEEN BOLCON
Date
2/23/11
Print or Type Name
KATHLEEN BOLCON
Title
PRES.

For Date
For Name
For
FOR SECRETARY OF STATE USE ONLY