



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. 12018		2. Name of Corporation EDGEWOOD HOME BUILDERS, INC.			
3. Street Address Principal Business Office 14 CARDINAL RD.		City CRANSTON	State RI	Zip 02921	
4. Business Phone No. 401-821-1473		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island HOME BUILDING					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ALFRED S. MELOCCARO		Vice President Name MARY JANE MELOCCARO			
Street Address 14 CARDINAL RD		Street Address 14 CARDINAL RD			
City CRANSTON	State RI	Zip 02921	City CRANSTON	State RI	Zip 02921
Secretary Name WENDY A. CATALFAMO		Treasurer Name ALFRED S. MELOCCARO			
Street Address 15 MEADOWLARK DR.		Street Address 14 CARDINAL RD			
City CRANSTON	State RI	Zip 02921	City CRANSTON	State RI	Zip 02921
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ALFRED S. MELOCCARO		Director Name MARY JANE MELOCCARO			
Street Address 14 CARDINAL RD		Street Address 14 CARDINAL RD			
City CRANSTON	State RI	Zip 02921	City CRANSTON	State RI	Zip 02921
Director Name WENDY A. CATALFAMO		Director Name			
Street Address 15 MEADOWLARK DR.		Street Address			
City CRANSTON	State RI	Zip 02921	City	State	Zip
9. SHARES AUTHORIZED 100		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
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 100	Class/Series COM.	Par Value NONE	

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 MAR 02 2011
Check No. BY 1387
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 ALFRED S. MELOCCARO
Date 2-3-11
Print or Type Name ALFRED S. MELOCCARO
Title PRES.