



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. 121789		2. Name of Corporation JDR HOLDINGS, INC.			
3. Street Address Principal Business Office 11 RHODDY AVENUE			City SOUTH ATTLEBORO	State MA	Zip 02703
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island GENERAL COMMERCIAL SERVICES INCLUDING BUT NOT LIMITED TO TRANSPORTATION AND/OR REAL ESTATE SERVICES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name RALPH J. ROBERTI			Vice President Name		
Street Address 11 RHODDY AVENUE			Street Address		
City SOUTH ATTLEBORO	State MA	Zip 02703	City	State	Zip
Secretary Name RALPH J. ROBERTI			Treasurer Name RALPH J. ROBERTI		
Street Address 11 RHODDY AVENUE			Street Address 11 RHODDY AVENUE		
City SOUTH ATTLEBORO	State MA	Zip 02703	City SOUTH ATTLEBORO	State MA	Zip 02703
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name RALPH J. ROBERTI			Director Name		
Street Address 11 RHODDY AVENUE			Street Address		
City SOUTH ATTLEBORO	State MA	Zip 02703	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	NO PAR VALUE		100	COMMON	NO PAR

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

MAR 17 2011

By 140313
RS

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
RALPH J. ROBERTI

Date
02/22/11

Print or Type Name
PRESIDENT

Title

File Date _____
Check No. _____
By: _____

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