



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) 222-3000

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. 32357		2. Name of Corporation QUIK STOP DELIMART OF NORTH SMITHFIELD, INC.			
3. Street Address - Principal Business Office 11 MAIN STREET / P.O. BOX 174			4. City SLATERSVILLE	5. State R.I.	6. Zip 02896
7. Business Phone No. 765-3327		8. State of Incorporation RHODE ISLAND			
9. Brief Description of the Character of Business Conducted in Rhode Island					
10. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
11. President Name MARCEL A. LABRECQUE			12. Vice President Name Jocelyn D. Labrecque		
13. Street Address 226 GREEN STREET			14. Street Address 226 GREEN STREET		
15. City N. SMITHFIELD	16. State R.I.	17. Zip 02896	18. City N. SMITHFIELD	19. State R.I.	20. Zip 02896
21. Secretary Name Jocelyn D. Labrecque			22. Treasurer Name MARCEL A. LABRECQUE		
23. Street Address SAME			24. Street Address SAME		
25. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
26. Director Name MARCEL A. LABRECQUE			27. Director Name Jocelyn D. Labrecque		
28. Street Address 226 GREEN STREET			29. Street Address 226 GREEN STREET		
30. City N. SMITHFIELD	31. State R.I.	32. Zip 02896	33. City N. SMITHFIELD	34. State R.I.	35. Zip 02896
36. Director Name			37. Director Name		
38. Street Address			39. Street Address		
40. State			41. City		
42. Zip			43. State		
44. Zip			45. Zip		
9. SHARES AUTHORIZED			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 2000	Class Series A	Par Value NO PAR
			COMMON		

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	
Date	MAR 21 2011
Check No.	21459
BY	21459
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: **Jocelyn D. Labrecque** Date: _____
 Print or Type Name: **Jocelyn D. Labrecque**
 Title: **SECRETARY**