RI SOS Filing Number: 201176777950 Date: 03/21/2011 4:00 PM

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.	2. Name of Corporation		
37597	PRUDENCE LEASING, INC.		
3. Street Address Principal Business Office	City	State	Zip
CHURCH STREET WHARF	BRISTOL	RI	02809
4. Business Phone No.	5. State of Incorporation		
253-9808	Rhode Island		

6. Brief Description of the Character of Business Conducted in Rhode Island
TO OPERATE A FERRY SERVICE

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
BRUCE G. MEDLEY			HARRY J. CHURCH		
Street Address			Street Address		
300 WEST MAIN ROAD			19 MANITON DRIVE		
City	State	Zip	City	State	Zip
PORTSMOUTH	RI	02871	PORTSMOUTH	RI	02871
Secretary Name			Treasurer Name		
BRUCE G. MEDLEY			HARRY J. CHURCH		
Street Address			Street Address		
300 WEST MAIN ROAD			19 MANITON DRIVE		
City	State	Zip	City	State	Zip
PORTSMOUTH	RI	02871	PORTSMOUTH	RI	02871

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
None					
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
200	Common	No par value

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 21 2011

Check No. By mnc

By: 1060

FOR SECRETARY OF STATE USE ONLY

60442-26-609595

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* 2-27-11

BRUCE G. MEDLEY
Print or Type Name

President
Title

Form 630 Rev. 08/08