



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

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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(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. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

|                                                                                                                                                            |             |                                                         |                                                                     |              |              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------|---------------------------------------------------------------------|--------------|--------------|
| 1. Corporate ID No.<br>107045                                                                                                                              |             | 2. Name of Corporation<br>Richard A. Perry & Sons, Inc. |                                                                     |              |              |
| 3. Street Address Principal Business Office<br>210 Norwich Westerly Road                                                                                   |             |                                                         | City<br>No. Stonington                                              | State<br>CT  | Zip<br>06359 |
| 4. Business Phone No.<br>(860) 535-8321                                                                                                                    |             | 5. State of Incorporation<br>Rhode Island               |                                                                     |              |              |
| 6. Brief Description of the Character of Business Conducted in Rhode Island                                                                                |             |                                                         |                                                                     |              |              |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |                                                         |                                                                     |              |              |
| President Name<br>Richard A. Perry, Sr.                                                                                                                    |             |                                                         | Vice President Name                                                 |              |              |
| Street Address<br>210 Norwich Westerly Road                                                                                                                |             |                                                         | Street Address                                                      |              |              |
| City<br>No. Stonington                                                                                                                                     | State<br>CT | Zip<br>06359                                            | City                                                                | State        | Zip          |
| Secretary Name<br>Richard A. Perry, Sr.                                                                                                                    |             |                                                         | Treasurer Name                                                      |              |              |
| Street Address<br>210 Norwich Westerly Road                                                                                                                |             |                                                         | Street Address                                                      |              |              |
| City<br>No. Stonington                                                                                                                                     | State<br>CT | Zip<br>06359                                            | City                                                                | State        | Zip          |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |                                                         |                                                                     |              |              |
| Director Name                                                                                                                                              |             |                                                         | Director Name                                                       |              |              |
| 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<br>1000 shares common no par                                                                                                          |             |                                                         | 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                                                    | Class/Series | Par Value    |
|                                                                                                                                                            |             |                                                         | None                                                                | 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.

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.

*R A Perry* 3/2/2011  
Signature Date

Richard A. Perry, Sr.

Print or Type Name

President

Title

|                                 |             |
|---------------------------------|-------------|
| <b>FILED</b>                    |             |
| File Date                       | MAR 29 2011 |
| Check No.                       |             |
| By: <b>BY</b>                   | <i>7503</i> |
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