

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, Rt 02904-2615 401.222,3010

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2010

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(verd)) is

subject to a penalty fee of \$25.00. . corporate ID No. 2. Name of Corporation McKAY'S FURNITURE INC. 8942 Street Address Principal Business Office State RI City North Kingstown 182 Lafayette Road 02852 -t. Business Phone No State of Incorporation 401 295-1915 RHODE ISLAND 6. Brief Description of the Character of Business Conducted in Rhode Island Retail sale of furniture and carpeting. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)  $\Box$  FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Keith G. McKay Kerry P. McKay Street Addres: Street Address 227 Boston Neck Road 170 Champlin Road State North Kingstown RI 02852 Saunderstown RI 02874 ecretary Name Scott C. McKay Scott C. McKay Street Address Street Address 52 Poplar Avenue 52 Poplar Avenue North Kingstown RΙ 02852 North Kingstown RΙ 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS: Keith G. McKay Kerry P. McKay Street Address Street Address 227 Boston Neck Road 170 Champlin Road State Ζip State ZipNorth Kingstown RI 02852 Saunderstown RI 02874 Director Name Scott C. McKay Street Address Street Address 52 Poplar Avenue City State North Kingstown RI 02852 9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMEN ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class Series l**wy** alues This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 100 Common Nene instruction sheet. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a recover or frustee.

this report must be executed on behalf of the corporation by the receiver or trustee.

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File Date		
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FOR SECRETARY OF STATE USE ONLY		

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	d affirm that I have examined this report, is and statements, and that all statements
contained herein are true and correct.	as and statements, and that art statements
Satt lun	4/5/4
Signature	Date
Scott C. McKay	
Print or Type Name	
Treasurer	
Title	·
	Form 630 Rev. 08/08