

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 101.222,3040

Form 630 Rev. 08/08

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 haw (R.I.G.L. 7-1.2-1501(e&d)) is subject to a penalty fee of \$25.00.

1. Corporete II) No. 7156	2. Name of Corporation Fountain Disper	2. Name of Corporation Fountain Dispensers Company, Inc.				
3 Street Address Principal Business Office 20 Alicia Circle			^{c∄} r Warwick	State RI	Ζφ 02886	
4 Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief Description of the Character buying and selling at whole.	sale or retail, lease,	servicing in ceiling of a				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Francis W. Marceau			Vice President Name			
Sircer Address 20 Alicia Circle			Street Address			
Warwick	State RI	^{Ζφ} 02886	City	State	Zip	
Secretary Name			Freusiwer Name			
Street Address			Street Address			
$\epsilon i t_{\Gamma}$	State	Zip	Gity	State	Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name None			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name			
Street Address			Street Address			
Сиу	State	Zip	CHy	Siette	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	СЙу	State	Zip	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
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.			Number of Shares	Class/Series	Par Value	
			10	common	no par value	
This report must be executed on behalf of the corporation by an authorized			d representative. If the	corporation is in the hand	ly of a receiver or tractor	
this report must be executed o	n behalf of the corpo	ration by the receiver of	or trustee.	oviporation is in the hand	is of a receiver of frustee.	
FIL	ED		including any ac	f perjury, I declare and affirm companying selfedules and sta are trie and contect.	that I have examined this report, atements, and that all suitements	
File DateSEP 2	0 -2011		Signature	s Whare	ea 9/16/11	
By 3328			Francis W. Marceau Print or Type Name President			
						FOR SECRETARY OF STA