RALPH MOIL	State of Rhode Island and Pr Office of the Secret		Fee: \$50.00
A A A A A A A A A A A A A A A A A A A	Division Of Busines	s Services	
148 W. River Street			
Providence RI 02904-2615			
Cretary of 5th	(401) 222-30	40	
Limited Liability Co Annual Report	mpany		
Filing Period: September	1 - November 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to			
file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2011			
1. ID No. <u>000163042</u>			
2. Exact Name of the Limited Liability Company <u>KARIN SPRAGUE STONE CARVERS, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
Design and hand carve memorials.			
5. Principal Office Address			
No. and Street: 904	TOURTELLOT HILL ROAD		
City or Town: SCI	Γυατε	State: <u>RI</u> Zip: <u>02857</u> Count	ry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
	TOURTELLOT HILL RD.		
City or Town: <u>N. S</u>	SCITUATE	State: <u>RI</u> Zip: <u>02857</u> Country	y: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code	e, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11			
CHRISTOPHER A. ANDERSON, ESQ. GORHAM & GORHAM 25 DANIELSON PIKE, P.O. BOX 46 NORTH SCITUATE, RI 02857-			

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 27 Day of October, 2011 at 12:48:27 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>KARIN SPRAGUE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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