



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 2012

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. 32542		2. Name of Corporation PAUL P. BAILLARGEON, INC.			
3. Street Address Principal Business Office 750 Providence Pike, PO Box 737			City Slatersville	State RI	Zip 02876
4. Business Phone No. (401) 762-0434		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island To provide legal services					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name PAUL P. BAILLARGEON			Vice President Name None		
Street Address 750 Providence Pike, PO Box 737			Street Address		
City Slatersville	State RI	Zip 02876	City	State	Zip
Secretary Name PAUL P. BAILLARGEON			Treasurer Name PAUL P. BAILLARGEON		
Street Address 750 Providence Pike, PO Box 737			Street Address 750 Providence Pike, PO Box 737		
City Slatersville	State RI	Zip 02876	City Slatersville	State RI	Zip 02876
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name PAUL P. BAILLARGEON			Director Name None		
Street Address 750 Providence Pike, PO Box 737			Street Address		
City Slatersville	State RI	Zip 02876	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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 100	Class/Series Common	Par Value 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 **JAN 06 2012**
 Check No. **By** *[Signature]*
 By: **20175**
 FOR SECRETARY OF STATE USE ONLY

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] 1/5/12
 Signature Date
PAUL P. BAILLARGEON
 Print or Type Name
President
 Title