



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. 00487781		2. Name of Corporation Parks Superior Sales, Inc of Conn			
3. Street Address Principal Business Office 16 Hall Hill Road			City Somers	State CT	Zip 06071
4. Business Phone No. 860-749-2218		5. State of Incorporation CT			
6. Brief Description of the Character of Business Conducted in Rhode Island specialty vehicle resales					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael S Parks			Vice President Name Tammy J Erickson		
Street Address 22 Candlewood Drive			Street Address 7 Heritage Lane		
City Somers	State CT	Zip 06071	City Somers	State CT	Zip 06071
Secretary Name Tammy J Erickson			Treasurer Name NONE		
Street Address 7 Heritage Dr			Street Address NONE		
City Somers	State CT	Zip 06071	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 Maureen Parks			Director Name Tammy J Erickson		
Street Address 22 Candlewood Dr			Street Address 7 Heritage Dr		
City Somers	State CT	Zip 06071	City Somers	State CT	Zip 06071
Director Name NONE			Director Name NONE		
Street Address NONE			Street Address NONE		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED \$ 5,000 CWP 10,500			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		NONE		NONE	

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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 09 2012  
Check No. \_\_\_\_\_  
By: 56203  
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 [Signature] Date 1/3/12  
Print or Type Name Michael S Parks  
Title President