



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. 64825		2. Name of Corporation Holiday Acres Campground, Inc.			
3. Street Address Principal Business Office 591 Snake Hill Road			City No. Scituate	State RI	Zip 02857
4. Business Phone No. (401) 934-0880		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island trailer park, children's day camp and other lawful purposes					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name John D. Biafore			Vice President Name BRADLEY L. STEERE		
Street Address 123 Dyer Street, Suite 3B			Street Address 1160 Putnam Pike		
City Providence	State RI	Zip 02903	City Chepachet	State RI	Zip 02814
Secretary Name BRADLEY L. STEERE			Treasurer Name JOHN D. BIAFORE		
Street Address 1160 Putnam Pike			Street Address 123 Dyer Street, Suite 3B		
City Chepachet	State RI	Zip 02815	City Providence	State RI	Zip 02903
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name John D. Biafore			Director Name		
Street Address 123 Dyer Street, Suite 3B			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Director Name			Director Name		
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 <b>MUST</b> BE COMPLETED		
			Number of Shares -0-	Class/Series	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**

FEB 06 2012

File Date \_\_\_\_\_  
Check No. 9221  
By: \_\_\_\_\_  
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: *John D. Biafore* Date: 1/5/12  
JOHN D. BIAFORE  
Print or Type Name  
PRESIDENT  
Title