



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**  
**Office of the Secretary of State - Division of Business Services**  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012**

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>63311</b>		2. Exact name of the Corporation <b>R-LIN-D Corporation DBA Fabric Gallery</b>		
3. Principal office address <b>606 Ten Rod Road, PO Box 1264</b>		City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
4. Business Phone No. <b>401-295-2760</b>		5. State of Incorporation <b>RI</b>		
6. Brief description of the character of business conducted in Rhode Island <b>retail sales of decorator interior fabrics for draperies, valances, upholstery and slipcovers, custom window shutters, window treatments and wall coverings</b>				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
President Name <b>Mrs. Deanna K Celico</b>		Vice-President Name <b>Mr. James P Celico</b>		
Street Address <b>37 Butternut Drive</b>		Street Address <b>37 Butternut Drive</b>		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>North Kingstown</b>	State <b>RI</b>
Secretary Name <b>Mr. James P Celico</b>		Treasurer Name <b>Mrs. Deanna K Celico</b>		
Street Address <b>37 Butternut Drive</b>		Street Address <b>37 Butternut Drive</b>		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>North Kingstown</b>	State <b>RI</b>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name <b>Mrs. Deanna K Celico</b>		Director Name <b>Mr. James P Celico</b>		
Street Address <b>37 Butternut Drive</b>		Street Address <b>37 Butternut Drive</b>		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>North Kingstown</b>	State <b>RI</b>
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
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.		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
		100	Common	No Par

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 FEB 06 2012  
 Check No 7659  
 BY [Signature]

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.

Mrs. Deanna K. Celico 2/3/2012  
 Signature of Authorized Representative Date

**Mrs. Deanna K Celico**  
 Print or Type Name of Authorized Representative

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