

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 Perlod: 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. 153792	2. Name of Corporation VC Holdings, Inc.				
3. Street Address Principal Business Office 1414 Atwood Avenue			Johnston	State RI	<i>Z\p</i> 02919
4. Business Phone No. 401-273-6800 5. State of Incorporation RHODE ISLAND					
6. Brief Description of the Character of OWNERSHIP AND DEVELO					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Alfred Carpionato			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Alfred Carpionato		
Street Address 1414 Atwood Avenue			Street Address 1414 Atwood Avenue		
City Johnston Secretary Name	State RI	^{Zip} 02919	City Johnston Treassurer Name	State RI	^{Zф} 02919
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name		
Street Address			Street Address		
City	State	Ζip	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) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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.			Number of Shares	Class/Series	Par Value
			100	Common	No Par Value
This report must be executed this report must be executed of the properties of the p		FEB 0 7 2012	Under penalty of per	ory, I declare any affirm	hat Lhave examined this report
Check No			Affred Carpionate Print of Type Name		
FOR SECRETARY OF STA	TE USE ONLY		President		
			,		Form 630 Rev. 08/08