



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 02904-2611
401.222.3044

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. 129034	2. Name of Corporation Warwick Livery, Inc.
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3. Street Address Principal Business Office 2345 WARWICK AVENUE	City WARWICK	State RI	Zip 02889
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4. Business Phone No. (401) 738-1977	5. State of Incorporation RHODE ISLAND
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6. Brief Description of the Character of Business Conducted in Rhode Island
TO PURCHASE AND MAINTAIN LIMOUSINES, HEARSES AND OTHER VEHICLES AND TO ENGAGE IN THE BUSINESS OF LEASING THOSE VEHICLES PRIMARILY TO FUNERAL HOMES.

7. NAMES AND ADDRESSES OF THE OFFICERS (SEE BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name MICHAEL F. QUINN	Vice President Name JEROME D. QUINN
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Street Address 130 BRIARCLIFF AVENUE	Street Address 607 ALGONQUIN DRIVE
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City WARWICK	State RI	Zip 02889	City WARWICK	State RI	Zip 02888
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Secretary Name PATRICK J. QUINN	Treasurer Name PATRICK J. QUINN
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Street Address 5 OAKWOOD DRIVE	Street Address 5 OAKWOOD DRIVE
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City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818
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8. NAMES AND ADDRESSES OF THE DIRECTORS (SEE BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name NONE	Director Name
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Street Address	Street Address
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City	State	Zip	City	State	Zip
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Director Name	Director Name
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Street Address	Street Address
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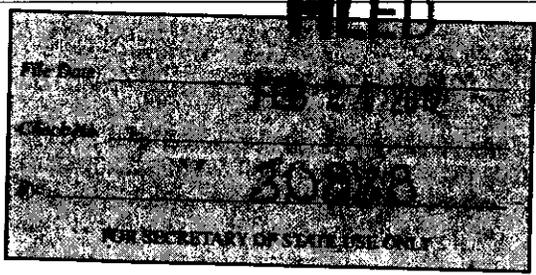
City	State	Zip	City	State	Zip
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9. SHARES AUTHORIZED

10. SHARES ISSUED (SEE BOX FOR ATTACHMENT)

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
	300	COMMON	NO PAR VALUE
	THIS SECTION MUST BE COMPLETED		

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.



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.

Michael F. Quinn 1-12-12
Signature Date

MICHAEL F. QUINN
Print or Type Name

PRESIDENT
Title