



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

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**Business Corporation
Annual Report**

Filing Period: January 1 - March 1

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.

Help with this form

ANNUAL REPORT YEAR: 2012			
1. Corporate ID No. <u>000086202</u>			
2. Name of Corporation <u>Linda F. Oakley, RPR., Inc.</u>			
3. Street Address Principal Business Office: No. and Street: <u>180 TABLE ROCK ROAD</u> City or Town: <u>SOUTH KINGSTOWN</u> State: <u>RI</u> Zip: <u>02879</u> Country: <u>USA</u>			
4. Business Phone No. <u>401-782-2415</u>			
5. State of Incorporation State: <u>RI</u>			
6. Brief Description of the Character of Business Conducted in Rhode Island <u>TO CONDUCT AND CARRY ON THE BUSINESS OF COURT REPORTING.</u>			
<p>FILED 1002 FEB 29 2012 BY <u>DR 1104956</u></p>			
7. Names and Addresses of the Officers and Directors: All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.			
	Title	Individual Name	Address

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2012 FEB 29 AM 10:02

Delete		First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
<input type="checkbox"/>	PRESIDENT	LINDA F OAKLEY	180 TABLE ROCK ROAD SOUTH KINGSTOWN, RI 02879 USA
<input type="checkbox"/>	Vice President	Linda F. Oakley	180 Table Rock Road South Kingstown, RI 02879 USA
<input type="checkbox"/>	Secretary	Linda F. Oakley	180 Table Rock Road South Kingstown, RI 02879 USA
<input type="checkbox"/>	Treasurer	Linda F. Oakley	180 Table Rock Road South Kingstown, RI 02879 USA

Select From Below  Title:

First Name: _____ Middle Name: _____ Last Name: _____ Suffix: _____
 Address: _____ City: _____ State: _____ Zip: _____ Country: _____

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	100.00	100.00

9. 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.

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: Linda F. Oakley
 Business Name: Linda F. Oakley, RPR, Inc.
 No. and Street: 180 Table Rock Road - Same Address as - 
 City or Town: South Kingstown State: RI Zip: 02879 Country: USA
 Contact Phone: 401-782-2415 ext: _____
 Contact Email: LindaRPR@aol.com

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 29 Day of February, 2012 at 6:44:47 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By Linda F. Oakley

Linda F. Oakley

Signature of Authorized Representative of the Corporation

President

Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-1.2. You hereby agree that any legal issues or causes of action arising from the submission of this

Accept Decline

[Click HERE to Submit This Information](#)

Form No. 630
Revised 09/07

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