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.	2. Name of Corporation		
51049	MAIN SAIL PROPERTIES, INC.		
3. Street Address Principal Business Office	City	State	Zip
UNIT #12 BELLTOWER PLAZA	BRISTOL	RI	02809
4. Business Phone No.	5. State of Incorporation		
(401) 253-2983	RHODE ISLAND		

6. Brief Description of the Character of Business Conducted in Rhode Island
TO PURCHASE, SELL, LEASE, RENT, MANAGE, AND DEVELOP REAL ESTATE

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
ROBERT G. HOLLANDS			PATRICIA TURNER		
Street Address			Street Address		
3 JUNIPER COURT			1 BAY AVENUE		
City	State	Zip	City	State	Zip
BRISTOL	RI	02809	BARRINGTON	RI	02806
Secretary Name			Treasurer Name		
ROBERT G. HOLLANDS			ROBERT G. HOLLANDS		
Street Address			Street Address		
3 JUNIPER COURT			3 JUNIPER COURT		
City	State	Zip	City	State	Zip
BRISTOL	RI	02809	BRISTOL	RI	02809

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
ROBERT G. HOLLANDS					
Street Address			Street Address		
3 JUNIPER COURT					
City	State	Zip	City	State	Zip
BRISTOL	RI	02809			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
300	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 _____

Check No. MAR 01 2012

By: 5583

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 *Date*

ROBERT G. HOLLANDS
Print or Type Name

PRESIDENT
Title

71923-5-730861

Form 630 Rev. 08/08