



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. 114652		2. Exact name of the Corporation Sumner Law Associates, Inc.		
3. Principal office address 200 Metro Center Blvd. Suite 9		City Warwick	State RI	Zip 02886
4. Business Phone No. 401-732-1020		5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island TO engage in the practice of law.				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
President Name Daniel R. Sumner, Esq.		Vice-President Name Daniel R. Sumner, Esq.		
Street Address 48 Wright Lane		Street Address 48 Wright Lane		
City Jamestown	State RI	Zip 02835	City Jamestown	Zip 02835
Secretary Name		Treasurer Name		
Street Address		Street Address		
City	State	Zip	City	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name Daniel R. Sumner, Esq.		Director Name		
Street Address 48 Wright Lane		Street Address		
City Jamestown	State RI	Zip 02835	City	Zip
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	Zip
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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		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.

File Date _____
 Check No _____
 By _____
FOR SECRETARY OF STATE USE ONLY

FILED

MAR 05 2012

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.

By *mmc* Signature of Authorized Representative *[Signature]* Date *2/25/12*

Daniel R. Sumner
 Print or Type Name of Authorized Representative

CR # 11044