

1. Entity ID No.

## 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.

2. Exact name of the Corporation

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

90622	MONTE	MONTELLA PROPERTIES, INC.				
3. Principal office address 3 Testa Circle			City Scituate	State RI	Zip <b>02857</b>	
4. Business Phone No. 401-529-4962			5. State of Incorporation Rhode Island			
Brief description of the char To purchase, sell, dev				gage or finance rea	l estate	
LIST ALL OFFICERS (NA	MES AND ADDR	ESSES) ("X" BOX FOR A	TACHMENT)			
President Name Vincent A. Montella			Vice-President Name Vincent A. Montella			
Street Address 3 Testa Circle			Street Address 3 Testa Circle			
ity Scituate	State RI	Zip <b>02857</b>	City Scituate	State RI	Zip <b>02857</b>	
Secretary Name Vincent A. Montella			Treasurer Name Vincent A. Montella			
Street Address 3 Testa Circle			Street Address 3 Testa Circle			
City Scituate	State RI	Zip <b>02857</b>	City Scituate	State RI	Zip 02857	
LIST ALL DIRECTORS (N	AMES AND ADD	RESSES) (\$200 BOX FOR	ATTACHMENT)			
Director Name Vincent A. Montella			Director Name			
Street Address 3 Testa Circle			Street Address			
City Scituate	State RI	Zip <b>02857</b>	City	State	Zip	
Director Name			Director Name	1		
Street Address			Street Address			
Dity	State	Zip	City	State	Zip	
). SHARES AUTHORIZED			10. SHARES ISSUE	O ("X" BOX FOR ATTAC	HMENT	
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	none	
This report must be executed		corporation by an authorize st be executed on behalf or			s of a receiver or trustee,	
File Date		FILED	Under penalty of p this report, includi	erjury, I declare and affi ing any accompanying s	rm that I have examined schedules and statements,	
Check No		MAR 05 2012		ents contained herein a	tell pr 2//4	
FOR SECRETARY OF STATE USE ONLY # 3562			Signature of Authorized Representative Date V  Vincent A. Montella/President			
Form No. 630 Revised: 01/2012		[]		e of Authorized Represent	ative	