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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.	2. Exact name of the Corporation		
00001840	EDDIES 529 Club Inc.		
3. Principal office address: 529 Warwick Ave	City: Warwick	State: RI	Zip: 02889
4. Business Phone No.: 401 461. 1770	5. State of Incorporation: Rhode Island		
6. Brief description of the character of business conducted in Rhode Island: Tarven			

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name: Edward Pelletier	Vice-President Name: Edward Pelletier
Street Address: 200 Hoffman Ave	Street Address: 200 Hoffman Ave
City: Cranston State: RI Zip: 02910	City: Cranston State: RI Zip:
Secretary Name: Bonnie lee Donahue	Treasurer Name: Edward Pelletier
Street Address: 442 Lake Shore Dr.	Street Address: 200 Hoffman Ave
City: War State: RI Zip: 02889	City: Cranston State: RI Zip: 02910

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name: Edward Pelletier	Director Name: Edward Pelletier
Street Address: 200 Hoffman Ave	Street Address: 200 Hoffman Ave
City: Cranston State: RI Zip: 02910	City: Cranston State: RI Zip: 02910
Director Name: Edward Pelletier	Director Name: Edward Pelletier
Street Address: 200 Hoffman Ave	Street Address: 200 Hoffman Ave
City: Cranston State: RI Zip: 02910	City: Cranston State: RI Zip: 02910

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) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
1000	Common	NOPV

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 19 2012

By: BY

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.

E F Pelletier 3/2/12
Signature of Authorized Representative Date

EDDWARD Pelletier
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012
74545-25-736358