



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. 64388		2. Name of Corporation Fine Line Graphics, Inc.			
3. Street Address Principal Business Office 90 DOUGLAS PIKE, P.O. BOX 17370			City SMITHFIELD	State RI	Zip 02917
4. Business Phone No. 401-854-8300		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island OPERATION OF PHOTOENGRAVING BUSINESS AND MANUFACTURE OF OFFSET PRINTING PLATES; SELL SAME					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JAMES E. TOLES			Vice President Name RONALD BEAUREGARD		
Street Address 13126 DANUBE LANE			Street Address 368 MOURNING DOVE DRIVE		
City ROSEMOUNT	State MN	Zip 55068	City N. KINGSTOWN	State RI	Zip 02881
Secretary Name JAMES E. TOLES			Treasurer Name RONALD BEAUREGARD		
Street Address 13126 DANUBE LANE			Street Address 368 MOURNING DOVE DRIVE		
City ROSEMOUNT	State MN	Zip 55068	City N. KINGSTOWN	State RI	Zip 02881
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	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.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
		Number of Shares 700	Class/Series COMMON	Par Value NO PAR VALUE	

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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** 306  
MAR 23 2012  
R 167075

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.

Ronald Beauregard 3/20/12  
Signature Date

Ronald Beauregard  
Print or Type Name

Vice President/Treasurer  
Title