



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. 256585		2. Exact name of the Corporation Knight Leasing, Inc.			
3. Principal office address 419 Shore Road		City Westerly	State RI	Zip 02891	
4. Business Phone No. 401-322-1574		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Company set up to lease equipment to Knight Builders, Inc.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Jonathan F. Knight			Vice-President Name Randolph C. Knight		
Street Address 37 Ayers Road			Street Address 419 Shore Rd.		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name			Treasurer Name Randolph C. Knight		
Street Address			Street Address 419 Shore Rd.		
City	State	Zip	City Westerly	State RI	Zip 02891
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
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					
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) <input type="checkbox"/>					
NUMBER OF SHARES 100		CLASS/SERIES CPW		PAR VALUE 0.01	

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 SECRETARY OF STATE
 CORPORATIONS DIV
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This report must be executed on behalf of the corporation by the 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

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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.

Randolph C. Knight 3/12/2012
 Signature of Authorized Representative Date

Randolph C. Knight
 Print or Type Name of Authorized Representative