



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 2013

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. <u>13942</u>		2. Exact name of the Corporation <u>EXETER GENERAL, INC.</u>		
3. Principal office address <u>339A SOUTH COUNTY TRAIL</u>		City <u>EXETER</u>	State <u>RI</u>	Zip <u>02822</u>
4. Business Phone No. <u>401-294-4836</u>		5. State of Incorporation <u>R.I.</u>		
6. Brief description of the character of business conducted in Rhode Island <u>REAL ESTATE RENTAL</u>				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
President Name <u>FRED HONG</u>		Vice-President Name <u>FRED HONG</u>		
Street Address <u>339A SOUTH COUNTY TRAIL</u>		Street Address <u>339A SOUTH COUNTY TRAIL</u>		
City <u>EXETER</u>	State <u>RI</u>	Zip <u>02822</u>	City <u>EXETER</u>	State <u>RI</u>
Secretary Name <u>FRED HONG</u>		Treasurer Name <u>FRED HONG</u>		
Street Address <u>339A SOUTH COUNTY TRAIL</u>		Street Address <u>339A S.O. COUNTY TRAIL</u>		
City <u>EXETER</u>	State <u>RI</u>	Zip <u>02822</u>	City <u>EXETER</u>	State <u>RI</u>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name <u>FRED HONG</u>		Director Name <u>CRAIG W. HONG</u>		
Street Address <u>339A SOUTH COUNTY TRAIL</u>		Street Address <u>20 BORDER ST</u>		
City <u>EXETER</u>	State <u>RI</u>	Zip <u>02822</u>	City <u>AMHERST</u>	State <u>MA</u>
Director Name <u>MARTIN F. HONG</u>		Director Name <u>BRADEEN B. HONG</u>		
Street Address <u>33 MARTIN ST</u>		Street Address <u>339A SOUTH COUNTY TRAIL</u>		
City <u>MILLBURY</u>	State <u>MA</u>	Zip <u>01527</u>	City <u>EXETER</u>	State <u>RI</u>
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
		<u>600</u>	<u>COMMON</u>	<u>NO PAR</u>

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 JAN 09 2013

Form No. 630
Revised 01/2010

By mmc
CH # 8913

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.

Signature of Authorized Representative

Date

Print or Type Name of Authorized Representative