



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

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

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.

FILED

Signature of Authorized Representative

Date

Print or Type Name of Authorized Representative

By mmc
 CH # 8913

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