



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 2013**

**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. 106828		2. Name of Corporation TRUDY S, INC.	
3. Street Address Principal Business Office 46 Woodcock Trail		City Charlestown	State RI
4. Business Phone No. (401) 364-6610		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island To engage in the facets of the commercial fishing industry			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Robert D. Smith		Vice President Name Gertrude M. C. Smith	
Street Address 46 Woodcock Trail		Street Address 46 Woodcock Trail	
City Charlestown	State RI	Zip 02813	City Charlestown
Secretary Name Robert D. Smith		Treasurer Name Gertrude M.C. Smith	
Street Address 46 Woodcock Trail		Street Address 46 Woodcock Trail	
City Charlestown	State RI	Zip 02813	City Charlestown
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name None		Director Name	
Street Address		Street Address	
City	State	Zip	City
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
9. SHARES AUTHORIZED			
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares		Class/Series	Par Value
200		common	no par
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.			

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: \_\_\_\_\_ BY \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY

**FILED**

JAN 30 2013

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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.

*Robert D. Smith* 1/25/2013  
Signature Date

Robert D. Smith

Print or Type Name

President

Title