



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. 7126		2. Exact name of the Corporation Dexter Investment Corp.			
3. Principal office address 70 Waterman Avenue			City East Providence	State RI	Zip 02914
4. Business Phone No. (401)434-1100		5. State of Incorporation RI			
6. Brief description of the character of business conducted in Rhode Island Real Estate investment					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Brent Dexter			Vice-President Name Brent Dexter		
Street Address 195 Riverside Drive			Street Address 195 Riverside Drive		
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915
Secretary Name Brent S. Dexter			Treasurer Name Kirk Dexter		
Street Address 122 Allerton Avenue			Street Address 35 Shore Drive		
City East Providence	State RI	Zip 02914	City Warren	State RI	Zip 02885
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Brent Dexter			Director Name Kirk Dexter		
Street Address 195 Riverside Drive			Street Address 35 Shore Drive		
City Riverside	State RI	Zip 02915	City Warren	State RI	Zip 02885
Director Name Sherrie Capuano			Director Name		
Street Address 99 Kearney Street			Street Address		
City Cranston	State RI	Zip 02920	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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			500	Comm	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.

FILED

FEB 06 2013

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File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Brent Dexter 2/1/13
 Signature of Authorized Representative Date

Brent Dexter

Print or Type Name of Authorized Representative