



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. 57007		2. Exact name of the Corporation Pascoag Land Corporation			
3. Principal office address 70 Valley Brook Drive			City East Greenwich	State RI	Zip 02818
4. Business Phone No.		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island To buy, sell, hold and/or develop real estate					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Richard Ahlborg			Vice-President Name Charles Cove		
Street Address 25088 Ridge Oak Drive			Street Address 160 Greenville Street		
City Bonita Springs	State FL	Zip 34134	City Pawtucket	State RI	Zip 02860
Secretary Name Vincent J. Mesolella			Treasurer Name Richard Ahlborg		
Street Address 27 Paddock Drive			Street Address 25088 Ridge Oak Drive		
City Lincoln	State RI	Zip 02865	City Bonita Springs	State FL	Zip 34134
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Richard Ahlborg			Director Name Vincent J. Mesolella		
Street Address 25088 Ridge Oak Drive			Street Address 27 Paddock Drive		
City Bonita Springs	State FL	Zip 34134	City Lincoln	State RI	Zip 02865
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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
			100	Common	\$.10 par value

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

FILED

FEB 25 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.

Richard Ahlborg 2/21/13
 Signature of Authorized Representative Date

Richard Ahlborg, President
 Print or Type Name of Authorized Representative

By *mme*
CR # 1503