



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.

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|--|--------------------|--|------------------------|---------------------|---------------------|
| 1. Entity ID No. 5652 | | 2. Exact name of the Corporation MHF, INC. | | | |
| 3. Principal office address 7 MONKEY WRENCH LANE | | City BRISTOL | State RI | Zip 02809 | |
| 4. Business Phone No. (401) 783-9716 | | 5. State of Incorporation RHODE ISLAND | | | |
| 6. Brief description of the character of business conducted in Rhode Island TO OWN, OPERATE, AND MANAGE REAL ESTATE | | | | | |
| 7. OFFICERS (NAME, ADDRESS, CITY, STATE, ZIP) (SEE INSTRUCTIONS) (SEE FORM FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| President Name HARRIET F. DWYER | | Vice-President Name KATHERINE F. SPARROW | | | |
| Street Address 7 MONKEY WRENCH LANE | | Street Address PO BOX 1242 | | | |
| City BRISTOL | State RI | Zip 02809 | City BRISTOL | State RI | Zip 02809 |
| Secretary Name PAUL SILVA | | Treasurer Name KATHERINE F. SPARROW | | | |
| Street Address 674 HOPE STREET | | Street Address PO BOX 1242 | | | |
| City BRISTOL | State RI | Zip 02809 | City BRISTOL | State RI | Zip 02809 |
| 8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| Director Name HARRIET F. DWYER | | Director Name KATHERINE F. SPARROW | | | |
| Street Address 7 MONKEY WRENCH LANE | | Street Address PO BOX 1242 | | | |
| City BRISTOL | State RI | Zip 02809 | City BRISTOL | State RI | Zip 02809 |
| Director Name PAUL SILVA | | Director Name | | | |
| Street Address 674 HOPE STREET | | Street Address | | | |
| City BRISTOL | State RI | Zip 02809 | 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 | |
| | | 800 | COMMON | .125 | |
| | | | | | |

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 28 2013
5787

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.

Harriet F. Dwyer 1/2/2013
Signature of Authorized Representative Date

HARRIET F. DWYER

Print or Type Name of Authorized Representative