

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 CORP	ORATIO	N ANNUAL RE	PORT FOR TH	IE YEAR	2006
Filing Period: January Filing Fee: \$50.00 • FA	ILURE TO FIL	E THIS REPORT BY M	ea or printed legibly. ARCH 31 WILL RESU	LT IN A \$25.00 PENA	LTY FEE.
1 Entity ID No. R	2 Exact nam	e of the Corporation		_	
85030	Orga	wizational	<del> </del>		
3 Principal office address 36 Haddard	y Dock	Rd	Haddam	State	06438
3 Principal office address 36 Haddarm Dock Rd 4 Business Phone No.			5 State of Incorporation  Bhode Is (and)		
P60-345 5 Brief description of the chara	- 3/2_0		Mode	S (and	
Manage	ment .	consulting	7		
7. LIST <u>ALL</u> OFFICERS (NAM	HES AND ADDRI	esses) ("X" box for Ái			
President Name	<i>a</i> (		Vice-President Name	ALCON A A A	29:
David W.	BUHY		Street Address	NONE	<del> </del>
Street Address 36 Haddas	a Dock	E Rol			<b>5</b> %m
DRVIA W. Street Address 36 Haddas City Haddas	State	06438	City	State	Zip , 15 %
Secretary Name			Treasurer Name	460	_ <b>_</b>
	NE			NONE	
Street Address			Street Address		8: 25
City	State	Zip	City	State	Zip — [T]
B. LIST ALL DIRECTORS (NA	MES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)		
Director Name	WE		Director Name	NONE	
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name  NONE			Director Name  NONE		
Street Address	7746		Street Address	140146	
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PARI VALUE
			600	54K	_0-
This report must be executed	on behalf of the o this report mut	corporation by an authorize at be executed on behalf of	the corporation by the re-	orporation is in the names ceiver or trustee. rjury, I declare and affiri	
File Date	<del></del>		this report, including	g any accompanying so nts contained herein ag	hedules and statement
Check No	<del></del>	ILLU	6 and	Wesher	1 2/25/1
Ву:	·····	APR 0 4 2013	Signature of Authoriz	red Representative	Date
FOR SECRETARY OF STAT	E USE ONLY	194428	Print or Type Name of	<i>L. BluL</i> of Authorized Reppesental	live
orm No. 630 evised: 01/2012	, v	8:41	Seem		
		4.9			