



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 2014

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. 34555		2. Exact name of the Corporation Capitol View Corporation			
3. Principal office address 55 Dorrance Street, 5th Floor			City Providence	State RI	Zip 02903
4. Business Phone No. (401) 331-0500			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Real estate investment and management					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Joseph H. Kimball, Jr.			Vice-President Name None		
Street Address 55 Dorrance Street, 5th Floor			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Secretary Name Joseph H. Kimball, Jr.			Treasurer Name Joseph H. Kimball, Jr.		
Street Address 55 Dorrance Street, 5th Floor			Street Address 55 Dorrance Street, 5th Floor		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Joseph H. Kimball, Jr.			Director Name		
Street Address 55 Dorrance Street, 5th Floor			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
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.					

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 BY 9505

FILED

JAN 29 2014

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.

Signature of Authorized Representative

Date

Joseph H. Kimball, Jr., President

Print or Type Name of Authorized Representative