



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 2012

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. 132239		2. Exact name of the Corporation Menotomy Properties, Inc			
3. Principal office address 190 Knight Street, Apt 3		City Providence	State RI	Zip 02909	
4. Business Phone No.		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Real Estate ownership and management					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Robert E Palmer, Jr		Vice-President Name C Theodore Steckel			
Street Address 126 Fieldstone Estates Rd		Street Address 34 Salisbury Street			
City York	State ME	Zip 03909	City Winchester	State MA	Zip 01890
Secretary Name Robert E Palmer, Jr		Treasurer Name C Theodore Steckel			
Street Address 126 Fieldstone Estates Rd		Street Address 34 Salisbury Street			
City York	State ME	Zip 03909	City Winchester	State MA	Zip 01890
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Robert E Palmer, Jr		Director Name C Theodore Steckel			
Street Address 126 Fieldstone Estates Rd		Street Address 34 Salisbury Street			
City York	State ME	Zip 03909	City Winchester	State MA	Zip 01890
Director Name Holly T Sargent		Director Name Maureen K Steckel			
Street Address 126 Fieldstone Estates Rd		Street Address 34 Salisbury Street			
City York	State ME	Zip 03909	City Winchester	State MA	Zip 01890
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
			5000	No Par Value	

2014 JAN 16 AM 11:27
 SECRETARY OF STATE
 CORPORATIONS DIV

2014 JAN 30 AM 11:15
 SECRETARY OF STATE
 CORPORATIONS DIV

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

JAN 30 2014

By: 49-2116171

A.A. 11:48 AM

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.

Robert E Palmer Jr 1-13-14
 Signature of Authorized Representative Date

ROBERT E PALMER JR
 Print or Type Name of Authorized Representative