

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

2014 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1 subject to a penalty fee of \$25.00.	501(e), each corporation fai	iling or refusing to file its ann	ual report within thirty (30) days aft	er the time prescribed by law (R.	I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No. 102206	2. Name of Corporation JCP Associates, Inc.				
3. Street Address Principal Business Office 36 Crocus Drive			City Cranston	State RI	Zip 02920
4. Business Phone No. 5. State of Incorporation Rhode Island					
6. Brief Description of the Character of Sales, distribution and market			and other products.		
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	. —	CES BEFORE USING ATT	ACHHIENTS (2)
President Name Jennifer Conklin			Vice President Name Jennifer Conklin		1 90
Street Address			Street Address		
36 Crocus Drive			36 Crocus Drive		5 5 20
^{City} Cranston	State RI	^{Ζip} 0 292 0	City Cranston	State RI	<i>Zip</i> 0 29 20 ⊆ □
Secretary Name Jennifer Conklin			Treasurer Name Jennifer Conklin		œ 😅
Street Address 36 Crocus Drive			Street Address 36 Crocus Drive		33
City Cranston	State RI	^{Zip} 02920	Сиу Cranston	State RI	^{Zip} 02920
8. NAMES AND ADDRESSES Director Name	OF THE DIRECTORS	S: ("X" BOX FOR ATT	ACHMENT) FILL IN SP Director Name	ACES BEFORE USING AT	TACHMENTS
Street Address			Street Address		
City	State	Zip	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) [] ISSUED SHARES THIS SECTION MUST BE COMPLETED		
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
			50	Common	No Par Value
This report must be executed	on behalf of the corn	oration by an authorize	d representative. If the corn	oration is in the hands of	a receiver or trustee.
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.					
		FILED			
		FEB 1 8 2014	including any accompa	ry, I declare and affirm that I anying schedules and statem ue and correct.	
File Date	By	Ou 2175/4	Stenature Stenature	_	1/18/14
Check No.			Signature Jennifer Conkli	'n	Date
_			Print or Type Name		· · · · · · · · · · · · · · · · · · ·

President

Title