



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. 42059		2. Exact name of the Corporation Encore Development Corporation			
3. Principal office address 8 Blackstone Valley Place		City Lincoln		State RI	Zip 02865
4. Business Phone No. 401-334-4100		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Real Estate.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Larry D. Riggs			Vice-President Name George G. Palmisciano		
Street Address 48 Tarklin Street <i>11 CAMELOT WAY</i>			Street Address 80 Bungy Road		
City NORTH SCITUATE North Providence	State RI	Zip 02904 <i>02857</i>	City North Scituate	State RI	Zip 02857
Secretary Name Ernest O. Rabideau, Jr.			Treasurer Name Larry D. Riggs		
Street Address 17 Sandra Drive			Street Address 48 Tarklin Street <i>11 CAMELOT WAY</i>		
City Bristol	State RI	Zip 02809	City NORTH SCITUATE North Providence	State RI	Zip 02904 <i>02857</i>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Larry D. Riggs			Director Name George G. Palmisciano		
Street Address 48 Tarklin Street <i>11 CAMELOT WAY</i>			Street Address 80 Bungy Road		
City NORTH SCITUATE North Providence	State RI	Zip 02904 <i>02857</i>	City North Scituate	State RI	Zip 02857
Director Name Ernest O. Rabideau, Jr.			Director Name		
Street Address 17 Sandra Drive			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
			372	COMMON	NONE

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 26 2014

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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

Larry D. Riggs, President

Print or Type Name of Authorized Representative

File Date

Check No

By:

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