



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Business Corporation  
Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000062399

2. Name of Corporation Island Restoration Associates, Inc.

3. Street Address Principal Business Office:

No. and Street: 457 CHAPEL STREET  
City or Town: NEW SHOREHAM

State: RI Zip: 02807 Country: USA

4. Business Phone No.

(401)782-9914

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

REAL ESTATE HOLDING COMPANY BUY SELL AND RETAIN REAL ESTATE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

| Title     | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-----------|------------------------------------------------|------------------------------------------------------------|
| SECRETARY | MARK J HAGOPIAN                                | 10 CRESTWOOD DRIVE<br>NARRAGANSETT, RI 02882 USA           |
| PRESIDENT | DANA A HAGOPIAN                                | 65 CENTRAL STREET<br>NARRAGANSETT, RI 02882 USA            |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Issued<br>and |
|----------------|-----------------|---------------------|---------------------|
|----------------|-----------------|---------------------|---------------------|

|     |  |          |                                                       |                                         |
|-----|--|----------|-------------------------------------------------------|-----------------------------------------|
|     |  |          | Total Authorized<br>Shares<br><i>Number of Shares</i> | Outstanding<br><i>Num of<br/>Shares</i> |
| CNP |  | \$0.0000 | 200.00                                                | 150                                     |

**9. 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.**

**Signed this 13 Day of January, 2015 at 3:47:05 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By DANA A. HAGOPIAN  
Signature of Authorized Representative of the Corporation

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.**

Form No. 630  
Revised 09/07

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State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

Nellie M. Gorbea  
*Secretary of State*

