



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

2015

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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. 123886		2. Exact name of the Corporation WILLETT AVENUE DONUTS, INC.		
3. Principal office address 925 Willett Avenue		City East Providence	State RI	Zip 02915-0000
4. Business Phone No.		5. State of Incorporation RI		
6. Brief description of the character of business conducted in Rhode Island operation of a donut shop				
STAFF OFFICERS NAMES AND ADDRESSES (SEE BOX FOR ATTACHMENT)				
President Name Erica Placido-Coelho		Vice-President Name Lena Placido		
Street Address 12 Leila Jean Drive		Street Address 12 Leila Jean Drive		
City Bristol	State RI	Zip 02809-	City Bristol	State RI
Secretary Name Erica Placido-Coelho		Treasurer Name Denise Nicolace		
Street Address 12 Leila Jean Drive		Street Address 14 Pine Acres Drive		
City Bristol	State RI	Zip 02809-	City Bellingham	State MA
STAFF DIRECTORS NAMES AND ADDRESSES (SEE BOX FOR ATTACHMENT)				
Director Name Erica Placido-Coelho		Director Name Lena Placido		
Street Address 12 Leila Jean Drive		Street Address 12 Leila Jean Drive		
City Bristol	State RI	Zip 02809-	City Bristol	State RI
Director Name Denise Nicolace		Director Name none		
Street Address 14 Pine Acres Drive		Street Address none		
City Bellingham	State MA	Zip 02019-	City none	State none
SHARES AUTHORIZED				
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
		104		Common
SHARES ISSUED (SEE BOX FOR ATTACHMENT)				
		PAR VALUE		
		No Par		

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.

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.

Erica Placido-Coelho

1/05/2015

Signature of Authorized Representative
Erica Placido-Coelho

Date

Print or Type Name of Authorized Representative
President

FILED

JAN 23 2015

000492