



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

Foreign Business Corp
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. 000532975

2. Name of Corporation Colwen Management, Inc.

3. Street Address Principal Business Office:

No. and Street: 230 COMMERCE WAY
City or Town: PORTSMOUTH

State: NH Zip: 03801 Country: USA

5. State of Incorporation

State: NH

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

Hotel Management and Acquisition

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CEO	LEO XARRAS	230 COMMERCE WAY PORTSMOUTH, NH 03801 USA
SR. VICE PRESIDENT	TERRENCE BICKHARDT	230 COMMERCE WAY PORTSMOUTH, NH 03801 USA
TREASURER	TERRENCE BICKHARDT	230 COMMERCE WAY PORTSMOUTH, NH 03801 USA
SR. VICE PRESIDENT	JULIE SCOTT	230 COMMERCE WAY PORTSMOUTH, NH 03801 USA
SECRETARY	DAVID P. VAN DER BEKEN	66 HANOVER STREET MANCHESTER, NH 03101 USA
PRESIDENT	LEO XARRAS	230 COMMERCE WAY PORTSMOUTH, NH 03801 USA
DIRECTOR	CHRISTINE S. THOMAS	1359 HOOKSETT ROAD HOOKSETT, NH 03106 USA

DIRECTOR	MARK C. SCHLEICHER	249 BRAGG HILL RD. NORWICH, VT 05055 USA
DIRECTOR	LEO XARRAS	230 COMMERCE WAY PORTSMOUTH, NH 03801 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	1,226.00	678

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 6 Day of August, 2015 at 2:26:19 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 /DAVID P. VAN DER BEKEN, SECRETARY/
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:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

