



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 91305		2. Name of Corporation TOLLGATE PROFESSIONAL BUILDING, INC.			
3. Street Address Principal Business Office 200 Toll Gate Rd Suite 201		City WARWICK	State RI	Zip 02886	
4. Business Phone No. 401-738-3113		5. State of Incorporation RHODE ISLAND		6. SIC Code 5538	
7. Brief Description of the Character of Business Conducted in Rhode Island OWNERSHIP AND MANAGEMENT OF REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Samuel F. Winsper			Vice President Name BRIAN WINSPER		
Street Address 2 Sally Ann Drive			Street Address 3705 Stonewall Circle		
City E. Greenwich	State RI	Zip 02818	City Atlanta	State GA	Zip 30339
Secretary Name Samuel F. Winsper			Treasurer Name Samuel F. Winsper		
Street Address 2 Sally Ann Dr			Street Address 2 Sally Ann Dr		
City E. Greenwich	State RI	Zip 02818	City E. Greenwich	State RI	Zip 02818
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Edward Winsper			Director Name Gregory Winsper		
Street Address 9002 Saint Pierre Lane			Street Address 47 Rollinsbrook Vista		
City Charlotte	State N.C.	Zip 28277	City Newnan	State GA	Zip 30265
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
300 COMM NO PAR VALUE			100	Common	NO PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\$150.00
OK
#2657
AW

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 Officer

Date

Samuel F. Winsper

Print or Type Name of Officer

Title of Officer

President

File Date	1-13-05
Check No.	26057
By:	<i>[Signature]</i>
FOR SECRETARY OF STATE USE ONLY	



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown, Secretary of State

100 North Main Street
Providence, RI 02903-1335
401.222.3040

#50.00 OK# 2538

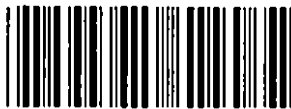
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 91305		2. Name of Corporation TOLLGATE PROFESSIONAL BUILDING, INC.			
3. Street Address Principal Business Office 200 Toll Gate Rd		City WARWICK	State R.I.	Zip 02886	
4. Business Phone No. 401-738-3113		5. State of Incorporation RHODE ISLAND			6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island OWNERSHIP AND MANAGEMENT OF REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Samuel F. Winsper			Vice President Name GREGORY G. WINSPER		
Street Address 2 Sally Ann Dr.			Street Address 140 Stowe Way		
City E. Greenwich	State RI	Zip 02818	City Sharnsburg	State GA	Zip 30277
Secretary Name Samuel F. Winsper			Treasurer Name Samuel F. Winsper		
Street Address 2 Sally Ann Dr.			Street Address 2 Sally Ann Dr.		
City E. Greenwich	State RI	Zip 02818	City E. Greenwich	State RI	Zip 02818
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name BRIAN D. WINSPER			Director Name EDWARD F. WINSPER		
Street Address 3705 Stonewall Circle			Street Address 9002 SAINT PIERRE LANE		
City Atlanta	State GA	Zip 30339	City Charlotte	State N.C.	Zip 28277
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
300 COMM NO PAR VALUE			100	Common	No PAR
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 1 3 0 5 *

File Date 2.25.04
Check No. 2538
By: 10P

FOR SECRETARY OF STATE USE ONLY

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 Officer

Date

Print or Type Name of Officer

Title of Officer

Form 630 Rev. 12/03



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

91305 TOLLGATE PROFESSIONAL BUILDING, INC.

3. Street Address Principal Business Office

200 Toll Gate Rd

City

WARWICK

State

RI

Zip

02886

4. Business Phone No.

401-738-3113

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5538

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

Rental Property

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Samuel F. Winsper

Vice President Name

Edward F. Winsper

Street Address

2 Sally Ann Dr

Street Address

9002 SAINT Pierre Lane

City

E. Greenwich RI

Zip

02818

City

Charlotte

State

N.C

Zip

28277

Secretary Name

Samuel F. Winsper

Treasurer Name

Samuel F. Winsper

Street Address

2 Sally Ann Dr

Street Address

2 Sally Ann Dr

City

E. Greenwich RI

Zip

02818

City

E. Greenwich

State

RI

Zip

02818

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Brian D. Winsper

Director Name

Street Address

3705 Stonewall Circle

Street Address

City

Atlanta GA

Zip

30339

City

State

Zip

Director Name

Gregory G. Winsper

Director Name

Street Address

140 Stowe Way

Street Address

City

Sharpsburg GA

Zip

30277

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

300 COMM NO PAR VALUE

Number of Shares

Class/Series

Par Value

100

Common

No PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 1 3 0 5 *

File Date: 2/19/03

Check No.: 2389

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

CK# 2389

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 Officer

[Signature]

Date

2/18/03

Print or Type Name of Officer

SAMUEL F. WINSPER

Title of Officer

President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 91305 2. Name of Corporation TOLLGATE PROFESSIONAL BUILDING, INC.
3. Street Address Principal Business Office 200 Toll Gate Rd City WARWICK State RI Zip 02886
4. Business Phone No. 401-738-3113 5. State of Incorporation RHODE ISLAND 6. SIC Code 5538

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

Rental Property

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>SAMUEL F. WINSPER</u>	Vice President Name <u>BRIAN D. WINSPER</u>
Street Address <u>2 Sally Ann Drive</u>	Street Address <u>3705 Stonewall Circle</u>
City <u>E. Greenwich</u> State <u>RI</u> Zip <u>02818</u>	City <u>Atlanta</u> State <u>GA</u> Zip <u>30339</u>
Secretary Name <u>SAMUEL F. WINSPER</u>	Treasurer Name <u>SAMUEL F. WINSPER</u>
Street Address <u>2 Sally Ann Drive</u>	Street Address <u>2 Sally Ann Drive</u>
City <u>E. Greenwich</u> State <u>RI</u> Zip <u>02818</u>	City <u>E. Greenwich</u> State <u>RI</u> Zip <u>02818</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name <u>EDWARD WINSPER</u>	Director Name
Street Address <u>(Apt 1311) 10930 Dixie Hills Drive</u>	Street Address
City <u>Charlotte</u> State <u>N.C.</u> Zip <u>28277</u>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
300 COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common No PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 1 3 0 5 *

File Date: 2/14/02

Check No.: 2262

By: LB

FOR SECRETARY OF STATE USE ONLY

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 Officer Samuel F. Winsper Date 2/13/02

Print or Type Name of Officer SAMUEL F. WINSPER

Title of Officer PRESIDENT



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

CHK# 2119

1. Corporate ID No. **91305** 2. Name of Corporation **TOLLGATE PROFESSIONAL BUILDING, INC.**
3. Street Address Principal Business Office **Suite 201 ZOOToll Gate Rd** City **WARWICK** State **RI** Zip **02886**
4. Business Phone No. **738-3113** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
Rental Property Office Building

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Samuel F. Winsper** Vice President Name **GREGORY WINSPER**
Street Address **2 Sally Ann Dr** Street Address **140 Stowe Way**
City **E. Greenwich** State **RI** Zip **02818** City **Sharpsburg** State **GA** Zip **30277**
Secretary Name **Samuel F. Winsper** Treasurer Name **SAMUEL F. WINSPER**
Street Address **2 Sally Ann Dr** Street Address **2 Sally Ann Dr**
City **E. Greenwich** State **RI** Zip **02818** City **E. Greenwich** State **RI** Zip **02818**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **EDWARD WINSPER** Director Name
Street Address **Apt 105 12900 Meadow Creek Lane** Street Address
City **Pineville** State **N.C.** Zip **28134** City State Zip
Director Name **Brian Winsper** Director Name
Street Address **2010 Lake Breeze Lane** Street Address
City **Atlanta** State **GA** Zip **30339** City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
300 SHS NO PAR COMMON

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common No PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 1 3 0 5 *

File Date: 3/2

Check No.: 2119

By: C

FOR SECRETARY OF STATE USE ONLY

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 Officer Samuel F. Winsper Date 2/11/01

Print or Type Name of Officer Samuel F. Winsper

Title of Officer President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 91305 2. Name of Corporation TOLLGATE PROFESSIONAL BUILDING, INC.
3. Street Address Principal Business Office 200 Toll Gate Rd City WARWICK State R.I Zip 02886
4. Business Phone No. 401-738-3113 5. State of Incorporation RHODE ISLAND 6. SIC Code 5538

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

Rental Property

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>Samuel F. Winsper</u> Street Address <u>2 Sally Ann Dr.</u> City <u>E. Greenwich</u> State <u>RI</u> Zip <u>02818</u>	Vice President Name <u>BRIAN D. Winsper</u> Street Address <u>2010 Lake Breeze Lane</u> City <u>Atlanta</u> State <u>GA</u> Zip <u>30339</u>
Secretary Name <u>Samuel F. Winsper</u> Street Address <u>2 Sally Ann Dr</u> City <u>E. Greenwich</u> State <u>RI</u> Zip <u>02818</u>	Treasurer Name <u>Samuel F. Winsper</u> Street Address <u>2 Sally Ann Dr</u> City <u>E. Greenwich</u> State <u>RI</u> Zip <u>02818</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name <u>Edward F. Winsper</u> Street Address <u>Apt 105 12900 Meadow Creek Lane</u> City <u>Pineville</u> State <u>N.C</u> Zip <u>28134</u>	Director Name Street Address City State Zip
Director Name <u>Gregory G. Winsper</u> Street Address <u>140 Stowe Way</u> City <u>Sharpsburg</u> State <u>GA</u> Zip <u>30277</u>	Director Name Street Address City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>300 SHS NO PAR COMMON</u>		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>100</u>	<u>Common</u>	<u>NO PAR</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 1 3 0 5 *

File Date: 2/25/00
1509
Check No.: 2

By: _____

FOR SECRETARY OF STATE USE ONLY

CK#1509
\$50.00

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.

Samuel Winsper 2/22/00
Signature of Officer Date
Samuel F. Winsper
Print or Type Name of Officer
PRESIDENT
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 91305		2. Name of Corporation TOLLGATE PROFESSIONAL BUILDING, INC.	
3. Street Address Principal Business Office 200 Toll Gate Rd		City WARWICK	State R.I
4. Business Phone No. 401-738-3113		5. State of Incorporation RHODE ISLAND	6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island Rental Property			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Samuel F. Winsper		Vice President Name	
Street Address 2 Sally Ann Dr.		Street Address	
City E. Greenwich	State RI	City	State
Zip 02818		Zip	
Secretary Name Samuel F. Winsper		Treasurer Name Samuel F. Winsper	
Street Address 2 Sally Ann Dr.		Street Address 2 Sally Ann Dr.	
City E. Greenwich	State RI	City E. Greenwich	State RI
Zip 02818		Zip 02818	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
300 SHS NO PAR COMMON			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
100	Common	No Par	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 1 3 0 5 *

File Date: **02-09-99**
Check No.: **1356**
By: **JD. / CR**
FOR SECRETARY OF STATE USE ONLY

#50.00
CR# 1356

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.
Samuel F. Winsper 2/7/99
Signature of Officer Date
Samuel F. Winsper
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State

Corporations Division

100 North Main Street, Providence, RI 02903-1335

401-277-3040

CK #1205 \$50.00



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 91305		2. Name of Corporation TOLLGATE PROFESSIONAL BUILDING, INC.	
3. Street Address Principal Business Office 200 Toll Gate Road		City Warwick	State R.I.
4. Business Phone No. 401-738-3113		5. State of Incorporation RHODE ISLAND	6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island Rental Property			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name Samuel F. Winsper		Vice President Name	
Street Address 2 Sally Ann Drive		Street Address	
City East Greenwich	State R.I.	City	State
Zip 02818		Zip	
Secretary Name Samuel F. Winsper		Treasurer Name Samuel F. Winsper	
Street Address 2 Sally Ann Drive		Street Address 2 Sally Ann Drive	
City East Greenwich	State R.I.	City East Greenwich	State R.I.
Zip 02818		Zip 02818	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)			
Director Name Samuel F. Winsper		Director Name	
Street Address 2 Sally Ann Drive		Street Address	
City East Greenwich	State R.I.	City	State
Zip 02818		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
300 SHS NO PAR COMMON		100	Common
			No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 1 3 0 5 *

File Date: **2/26**
Check No.: **1205**
By: **[Signature]**
FOR SECRETARY OF STATE USE ONLY

CK #1205

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] **2/24/98**
Signature of Officer Date
Samuel F. Winsper
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 91305		2. Name of Corporation TOLLGATE PROFESSIONAL BUILDING, INC.	
3. Street Address Principal Business Office 200 Tollgate Road		City Warwick	State RI
4. Business Phone No. 401-738-3113		5. State of Incorporation RHODE ISLAND	6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island own and manage real estate			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name Samuel F. Winsper		Vice President Name none	
Street Address 200 Tollgate Road		Street Address	
City Warwick,	State RI	City	State
Zip 02886		Zip	
Secretary Name Samuel F. Winsper		Treasurer Name Samuel F. Winsper	
Street Address same as above		Street Address same as above	
City	State	City	State
Zip		Zip	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)			
Director Name Samuel F. Winsper		Director Name	
Street Address same as above		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
300 SHS NO PAR COMMON		100	common
	Par Value		Par Value
			no par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: **1/14/97**
Check No.: **1030**
By: **[Signature]**
FOR SECRETARY OF STATE USE ONLY

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 Officer: **[Signature]** Date: **1/8/97**
Print or Type Name of Officer: **Samuel F. Winsper, president,**
sec'y & treasurer
Title of Officer