

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222,3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: January 1 - March 1 Filing Fee: \$50.00

(FORM MUST BE TYPED							
1. Corporate ID No.	2. Name of Corpo						
37020	H.N.S., INC.						
3. Street Address Principal E	• • • • • • • • • • • • • • • • • • • •		City	State	Zip		
133 OLD TOWER H	ILL RD		WAKEFIELD	RI	02879		
4. Business Phone No.		5. State of Incorpora			6. SIC Code		
4017890217		RHODE ISLA	.ND		5884		
7. Brief Description of the C TO OPERATE A NEWS	haracter of Business ConsTAND AND CONVEN	ducted in Rhode Island IENCE STORE					
8. NAMES AND ADDR	ESSES OF THE OFF	ICERS ("X" BOX FOR	ATTACHMENT) FILL IN SI Vice President Name	ACES BEFORE USING A	TTACHMENTS		
Sally H. Minett.	i		· Freeman A. Hea	lv. Jr.			
Street Address			Street Address				
212 Briarwood D	rive		30 Edgewater R	oad			
City	1 State	Zip	City	State	Zip		
Wakefield	RI	02879	Wakefield	RI	02879		
Secretary Name	• • • • • • • • • • • • • • • • • • • •		Treasurer Name				
Sally H. Minett:	i		Sally H. Minett	i			
· Sireet Address			Sireei Address		· · · · · · · · · · · · · · · · · · ·		
212 Briarwood D	rive		.212 Briarwood [Drive			
City	State	Zip	City	State	Zip		
Wakefield	RI	02879	. Wakefield	įRI	02879		
9. NAMES AND ADDR Director Name	ESSES OF THE DIR	ECTORS ("X" BOX FO	DR ATTACHMENT) FILL, IN Director Name	SPACES BEFORE USING	ATTACHMENTS		
Sally H. Minett:	i		'Freeman A. Hea	ly, Jr.			
Sireet Address	· · · · · · · · · · · · · · · · · · ·		·Sircei Address				
212 Briarwood D	rive		30 Edgewater Ro	30 Edgewater Road			
City	State	Zip	•City	State	Zip		
Wakefield	RI	02879	.Wakefield	RI	02879		
Director Name		, , ,, , , , , , , , , , , , , , , , ,	Director Name		• • • • • • • • • • • • • • • • • • •		
Street Address			· Street Address				
			•				
City	State	Zip	.City	State	Zip		
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10. SHARES AUTHOR	IZED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED (")	Y" BOX FOR ATTACHMEN	VD C		
AUTHORIZED SHARES			ISSUED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par talue		
100 COMM NO PAR	VALUE		100	Common	No Par		
· · · · · · · · · · · · · · · · · · ·							
·							
This report must be sig	gned in ink by eithe	r the President, Vice	President, Secretary, Assi.	stant Secretary, Treas	urer, Receiver or Trustee		
	22 B B \$8						
3 7	0 2 0		Under penalty of pe	rjury, I declare and affirm	that I have examined		
				g any accompanying sched			
37020 DBC 91/19/0	05 11:16:55 AM			nts contained herein are tra			
l ペッゴ.	45		21		1/2/1/		
File Date		-	July of t.	Minsell	1/26/05		
Check No.	49410		Signature of Officer	n 1.	Date '		
		- [<u> </u>	Minetti			
B _{Y.'}	Ü		Print or Type Name of	Officer			
FOR SECRETARY OF STA	TE LICE ONLY	-	Preside	nt			
TOR SECRETART OF STA	USE USE UNLY		Tille of Officer	v	Form 630 12/01		



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

Matthew A. Brown, Secretary of State

2004 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _____ 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 37020 H.N.S., INC. ZID State 3. Street Address Principal Business Office 02879 133 Old Tower Hill Road Wakefield RI 6. SIC Code 4. Business Phone No. 5. State of Incorporation 789-0217 5884 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A NEWSTAND AND CONVENIENCE STORE Vice President Name President Name Freeman A. Healy, Jr. Sally H. Minetti Street Address Street Address 30 Edgewater Road 212 Briarwood Drive Zip 02879 02879 Wakefield RI Wakefield RI Treasurer Name Secretary Name <u>Sally H. Minetti</u> Sally H. Minetti Street Address Street Address 212 Briarwood Drive 212 Briarwood Drive City State 7.ip RI 02879 Wakefield RI 02879 Wakefield ☐ FILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) Director Name Sally H. Minetti Freeman A. Healy, Jr. Street Address Street Address 212 Briarwood Drive 30 Edgewater Road City State City State Zip Wakefield 02879 02879 RI Wakefield RI Director Name Director Name Street Address Street Address Z.Ip City State Zip City State 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 100 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

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File Date	ECEIVED	
Check No.	JAN 2 2 2004	7
Ву:	BY 10 3383	}
į	FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm tha including any accompanying schedules and state	
contained herein are true and/correct.	,
Sally H. Mireta'	1/12/04
Signature of Officer	Date
Sally H. Minetti	
Print or Type Name of Officer	
President	
Title of Officer	Form 630 Pay 13/03

2. Name of Corporation

H.N.S., INC.

(FORM MUST BE TYPED OR PRINTED IN BLACK)

3. Street Address Principal Business Office

1. Corporate 1D No. 37020

Street Address

AUTHORIZED SHARES

100 COMM NO PAR VALUE

Number of Shares

City

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

Zip

Zip

Par Value

No Par

Form 630 12102

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

401-222-3040

133 Old Tower .	Hill Road,	5. State of Incorporation	Wakefield	RI	02879 6. SIC Code
789-0217 7. Brief Description of the Characte	r of Business Conducted in Ri	RHODE ISLAND			5884
To operate a 1 8. NAMES AND ADDRES President Name		RS ("X" BOX FOR ATTACH	MENT) FILL IN SPACES BE Vice President Name	FORE USING ATTACK	IMENTS .
Sally H. Mines	Eti i		Freeman A. He	ealy, Jr.	
212 Briarwood	Drive State	Zip	30 Edgewater	Road	Zip
Wakefield Secretary Name	ŔI	02879	Wakefield Treasurer Name	RI	02879
Sally H. Mine	tti		Sally H. Mine	etti	
212 Briarwood	Drive State	Zip	212 Briarwood	d Drive	Zip
Wakefield 9. NAMES AND ADDRES Director Name	RI SSES OF THE DIRECT	02879 CORS (*X* BOX FOR ATTA	Wakefield CHMENT) FILL IN SPACES Director Name	RI before using atta	02879 CHMENTS
Sally H. Mine	tti		Freeman A. Hea	aly, Jr.	
212 Briarwood	Drive State	Zip	30 Edgewater	Road	Zip
Wakefield Director Name	RI	02879	Wakefield Director Name	RI	02879

City

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

Zip

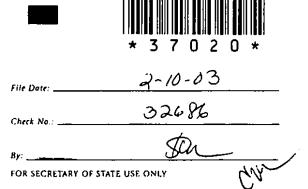
Par Value

Street Address

ESSUED SHARES Number of Shares

100

City



State

Class/Series

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

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and

State

Class/Series

Common

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

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

2002 PROFIT COPPORATION ANNIIAL PEROPT FOR THE VEAR



Filing Period: Januar)			OKI TOK TILL	ILAK	PLEASE R INSTRUCT
FORM MUST BE TYPED IN BL		•			
. Corporate ID No.	2. Name of Corporation	n			
37020	H.N.S., INC.		City	State	#:-
1. Street Address Principal Business			•	RI	^{Zip} 02879
133 Old Tower Business Phone No.	HIII ROAG	5. State of Incorporation	Wakefield	KI	6. SIC Code
789-0217 Brief Description of the Characte	r of Business Conducted in F	RHODE ISLAND			5884
To operate a 3. NAMES AND ADDRES President Name		l convenience ERS (*X* BOX FOR ATTACH		EFORE USING ATTAC	CHMENTS
Sally H. Mine	tti		Freeman A. He	ealy, Jr.	
212 Briarwood	Drive		30 Edgewater	Road	
ity	State	Zip	City	State	Zip
Wakefield	RI	02879	Wakefield	RI	02879
ecretary Name			Treasurer Name		
Sally H. Mine	tti		Sally H. Mine Street Address	etti	
212 Briarwood	Drive State	Zip	212 Briarwood	State	Zip
Wakefield	RI	02879	Wakefield	RI	02879
D. NAMES AND ADDRES Director Name	SSES OF THE DIREC	TORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES Director Name	BEFORE USING ATTA	ACHMENTS
Sally H. Mine	tti		Freeman A. He Street Address	ealy, Jr.	
212 Briarwood	Drive		30 Edgewater	Road	
City	State	Zip	City	State	7.ip
Wakefield Director Name	RI	02879	Wakefield Director Name	RI .	02879
iteet Address			Street Address		
Sity	State	Zip	City	State	Zip
O. SHARES AUTHORIZE	D ("X" BOX FOR ATTAC	HMENT)	11. SHARES ISSUED (*X	* BOX FOR ATTACHMENT	7)
lumber of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value
100 COMM NO PAR VAL	UE		100	Common	No Par

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



1-16-02 31416 Oc File Date: . Check No. -

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.

<u>Sally H. Minetti</u> Print or Type Name of Officer

President

Title of Officer - S

Form 630 12/01

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

2001

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

(FORM MUST BE TYPED IN BLACK)

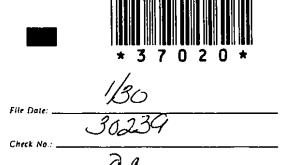
1. Corporate 187020

ANNIE & Corpo TINC

0.020					
3. Street Address Principal Business	Office		City	State	Zip
133 Old Tower 4. Business Phone No.	Hill Road	⁵ RHOGE ^{nc} TSEAND	Wakefield	RI	02879 6. 5884 e
789–0217 7. Brief Description of the Characte	r of Business Conducted in	Rhode island			
To operate a n 8. NAMES AND ADDRES President Name				BEFORE USING ATTAC	HMENTS
Sally H. Minet	ti		Freeman A. Ho	ealy, Jr.	
212 Briarwood	Drive State	Zip	30 Edgewater	Road State	Zip
Wakefield Secretary Name	RI	02879	Wakefield Treasurer Name	RI	02879
Sally H. Minet	ti		Sally H. Min	etti	
212 Briarwood	Drive State	Zip	212_Briarwoo	od Drive	Zip
Wakefield 9. NAMES AND ADDRES Director Name	RI SSES OF THE DIREC	02879 CTORS ("X" BOX FOR ATTAC	Wakefield CHMENT) FILLIN SPAC Director Name	R I ES BEFORE USING ATTA	02879 CHMENTS
Sally H. Minet	ti		Freeman A. He	ealy, Jr.	
212 Briarwood	Drive State	Zip	30 Edgewater	Road State	Zip
Wakefield Director Name	RI	02879	Wakefield Director Name	RI	02879
Street Address			Street Address	•	
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE	ED ("X" BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Volue
100 COMM NO PAR	VALUE		100	C	No Day

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

100



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.

| Ally H. Minetti
| Print or Type Name of Officer

Common

Title of Officer

President

Fam. 630 12/00

No Par



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOR PILASS, READ INSTRUCTIONS

,					(Best no care
(FORM MUST BE TYPED IN BLAC	CK)				
1. Curporate ID No.	2. Name of Corporation	Ort.			
37020 3. Street Address Principal Business (H.N.S.,	INC.	City	State	Zip
133 Old Tower F	Iill Road	5. State of Incorporation	Wakefield	RI	02879 6. SIC Code
789-0217 7. Brief Description of the Character	of Business Conducted in	RHODE IS	LAND		5884
To operate a ne 8. NAMES AND ADDRESS President Name					
Sally H. Minett	:i		Freeman A. H Street Address	_	
212 Briarwood I	rive		30 Edgewater	Road	
_{cuy} Wakefield	State RI	21p 02879	City Wakefield	State RI	02879
Secretary Name			Treasurer Name		
Sally H. Minett	:i		Sally H. Min Street Address	etti	
212 Briarwood I	orive State	Zip	30 Edgewater	Road State	Zip
Wakefield	RI	02879	Wakefield	RI	02879
9. NAMES AND ADDRESS Director Name Sally H. Minett		CTORS (*X* BOX FOR ATT)	ACHMENT) Director Name Freeman A. H	ealy, Jr.	
Street Address 212 Briarwood I	Orive		Street Address 30 Edgewater	Road	
^{City} Wakefield	State RI	^{21p} 02879	Wakefield	State RI	02879
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZES AUTHORIZED SHARES) (*X* BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (*X* E	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COM NO PAR	VAL		100	Common	No Par

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

	2/10/00	
File Date:	1891	
Check No.: _	<u>C</u> e	
By:	ABY OF STATE LISE 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.

Sally H. Minetti 1/31/00
Signature of Officer Date

Sally H. Minetti

Print or Type Name of Officer

President and Secretary, Treasurer

100

Title of Officer



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

STOP PLEASY READ INSTRUCTIONS

(FORM MUST BE TYPED IN BL	ACK)				
I. Corporaté ID No. 37020	2. Name of Corporation H.N.S., INC.	·	to a will	न् र ्प्रभ	
3. Street Address Principal Business	s Office		City	State	Zip
133 Old Tower	Hill Road		Wakefield	RI	02879
4. Business Phone No.		5. State of Incorporation			6. SIC Code
789-0217		RHODE ISLAND			5884
7. Brief Description of the Characte	a of Business Conducted in Rh	ode Island			
To operate a r	newsstand and	convenience	store		
8. NAMES AND ADDRES	SSES OF THE OFFICE	RS ("X" BOX FOR ATTACHE	MENT) FILL IN SPACES B	EFORE USING ATTAC	HMENTS
President Name			Vice President Name		
Sally H. Minet	iti		Freeman A. Hea	aly, Jr.	
Street Address			Street Address		
212 Briarwood	Drive		30 Edgewater 1	Road	
City	State	Zip	City	State	Zip
Wakefield	RI	02879	Wakefield	RI	02879
Secretary Name			Treasurer Name	•	• • • • • • • • • • • • • • • • • • • •
Sally H. Minet	iti		Sally H. Mine	tti	
Street Address			Street Address		
212 Briarwood	Drive		212 Briarwood	Drive	
City 5 - 1 - 2	State	Zip	City	State	7.1p
Wakefield	RI	02879	Wakefield	RI	02879
9. NAMES AND ADDRES	SES OF THE DIRECT	ORS ("X" BOX FOR ATTAC		BEFORE USING ATTA	CHMENTS
Director Name	LL:		Director Name	al Tw	
Sally H. Minet	:[1		Freeman A. Hea	ary, Jr.	
Street Address 212 Briarwood	Drivo		Street Address	Poad	,
		**	30 Edgewater 1		·
Wakefield	State RI	21p 02879	Wakefield	State RI	02879
Director Name .	IV I	02075	Director Name		
Director (some		,	Director Name		
Street Address			Street Address		
City	Chara	▼ 10.	a.		
City.	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	.D (*X* BOX FOR ATTACH	MENT)	11. SHARES ISSUED (*X	* BOX FOR ATTACHMENT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COM NO PAR V	'AL		100	Common	No Par
This report must be sign	and in ink by sither	the Dresident Vice De		· · · · · · · · · · · · · · · · · · ·	
inis report must be sign	ed in link by either	the fresident, vice fr	esident, secretary, Assist	ant Secretary, Treast	irer, Receiver of Irustee
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By:		· .	17),				
FOR SECRETAR	Y OF STATE USE	ONL	Υ			_		

Officer penalty of perjury, I deciare and a	illitm that I have examined
this report, including any accompanying	schedules and statements, and
that all statements contained herein are	true and correct.
Sacy H. Minist	
Signature of Officer	Date
SAMLY H. MINETTI	,
Print or Type Name of Officer	
Secretary	
Title of Officer //	

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

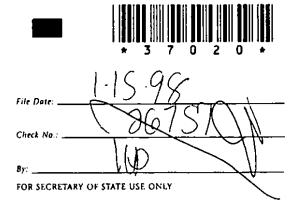
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

401-277-3040

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN	BLACKI				
1. Corporate ID No. 37020	2. Name of Corporation H.N.S., INC.				
3. Street Address Principal Bush	ness Office		City	State	Zip
133 Old Towe:	r Hill Road	S. State of Incorporation	Wakefield	RI	0 28 7 9 6. SIC Code
789-0217 7. Brief Description of the Char.	acter of Business Conducted in Ri	RHODE ISLAND			5884
	newsstand and RESSES OF THE OFFICE				
Freeman A. Ho	ealy, Jr.		Jane C. Heal	Y	
30 Edgewater	Road		30 Edgewater	Road	
City	State	Zip	City	State	Zip
Wakefield Secretary Name	ŔI	02879	Wakefield Treasurer Name	RI .	02879
Sally H. Mine	etti `		Freeman A. He Street Address	ealy, Jr.	
212 Briarwoo	d Drive	•	30 Edgewater	Road ,	
City	State	Zip	City	State	Zíp
Wakefield	RI	02879	Wakefield	RI	02879
9. NAMES AND ADDI	RESSES OF THE DIREC	TORS ("X" BOX FOR ATTA	CHMENT) Director Name		
Freeman A. H	ealy, Jr.		Jane C. Heal Street Address	У	
30 Edgewater	Road		30 Edgewater	Road	
City	State	Zip	City	State	Zip
Wakefield Director Name	RI	02879	Wakefield Director Name	RI	02879
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHOR	IZED ("X" BOX FOR ATTAC	HMENT)	11. SHARES ISSUED (* ISSUED SHARES	X" BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COM NO PAR	VAL		100	Common	No Par

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

Signature of Officer A Howly Jr.

rint or Type Name of Officer



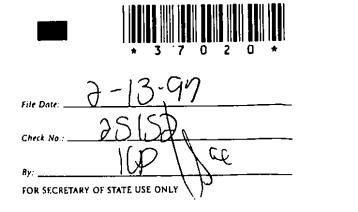
James R. Langevin, Secretary of State s Division 2903-1335 -277-3040

AND PROVIDENCE PLANTATIONS Office of the Secretary of State	Corporation: 100 North Main Street, Providence, RI 02 401
PROFIT CORPORATION ANNUAL REPORT 1997	PLEAS



Filing Period: Janu	ary 1-March 1 • .	Filing Fee: \$50.00			BI FOR
(FORM MUST BE TYPED IN	BLACKI				THIS FOR
1. Corporate ID No. 37020	2. Name of Corporation H.N.S., INC.	on			
3. Street Address Principal Bus			City	State	zip 02879
133 Old Tower	Hill Road		Wakefield	RI	6. SIC Code
4. Business Phone No.		5. State of Incorporation			5884
789-0217		RHODE ISLA	ממו		0004
	racter of Business Conducted in		ctore		
_	newstand and				
	RESSES OF THE OFFIC	CERS ("X" BOX FOR ATT	ACHMEN 17 Vice President Name		
President Name Freeman A. He	alv. Jr.		Jane C. Heal	. У	
Street Address			Street Address		
30 Edgewater	Road		30 Edgewater	Road	
City	State	Zip	City	State	Zip
Wakefield Secretary Name	RI	0287 7	Wakefield Treasurer Name	RI	02879
Sally H. Mine	etti	•	Freeman A. H	lealy, Jr.	
212 Briarwood	Drive		30 Edgewater	Road	
City	State	Zip	City	State	Zip
Wakefield	RI	02879	Wakefield	RI	02879
9. NAMES AND ADD	RESSES OF THE DIRE	CTORS ("X" BOX FOR A	Director Name		
Freeman A. He	ealy, Jr.		Jane C. Heal	Ly	
30 Edgewater	Road		30 Edgewater	Road	
City	State	Zip	City	State	Zip
Wakefield Director Name	RI	02879	Wakefield Director Name	RI 	02879
Director (Vanc			Street Address		
Street Address			Street Maaress		
City	State	Zip	City	State	Zip
10. SHARES AUTHO	RIZED AND ISSUED (*	X" BOX FOR ATTACHMEN	IT) ISSUED SHARIS		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value
100 COM NO PA	R VAL		100	Common	No Par

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



PROFIT CORPORATION ANNUAL REPORT

1996

DI FACE TYPE OR DRINT IN BLACK INK



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State

Corporations Division 100 North Main Street Providence, Rhode Island, 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

CORPORATE IO NO 2. NAME OF CORPORATE	ON .		····	
37020 H.N.	S., INC.	any	STATE	T2DP COOE
133 Old Tower Hill Road		. Wakefield	RI	j 02879
(401) 789-0217	5. STATE OF INCORPORATION RHODE I	SLAND		5884
mes description of the character of business conducted with To operate a newstand a		e store	· 	
ESOLUT NAME Freeman A. Healy, Jr.	AMES AND ADDR	ESSES OF THE OF WCE PRESIDENT NAME Jane C. Heal		····
30 Edgewater Road		30 Edgewater		
Wakefield RI	72P00E 02879	Wakefield	STATE RI	02879
Sally H. Minetti Retrapass		Freeman A. H	ealy, Jr.	
212 Briarwood Drive	72P COOE	30 Edgewater	Road	7 ZP C006
Wakefield RI	02879	Wakefield	RI	_ 02879
Freeman A. Healy, Jr.	AMES AND ADDR	Jane C. Heal	.	
30 Edgewater Road	. 2/r coo∈	30 Edgewater		
Wakefield RI	02879	Wakefield	RI	02879
REET ADDRESS		1 STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·
Y STATE	Z# C00E	tony	SYATE	ΣP C00ε
1 0 . AUTHORIZED SHARES	SHARES AUTHOR	IZED AND ISSUED	ISSUED SHARES	
INDVBER OF SHARES CLASS / SERTES	PAR VALUE	MUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100 COM NO PAR VAL		100	Common	No Par Value
		·	1	1
		GNED IN INK by either the stant Secretary, Treasurer,		e (5)

File Date: Check No: Ву: 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.

Freeman a Hes

State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

ANNUAL REPORT

Please Type or Print File Annually – Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID:		Annual Report for the year:		
H.M.S.,			,	
Name of Corporation:	principal office:	[X] Business Corpo	heck one): oration (See RIGL Chapter 7-1.1) crvice Corporation (See RIGL Chapter)	apter 7-5.1)
•		To_operate	e character of business conducted _a_newstand_and_ e_store	
Phone: (_401) 789-0217				
	THE NAMES OF THI	E OFFICERS ARE:		
PRESIDENT	STREET ADDRI	iss	CITY/STATE	ZIP CODE
Freeman A. Healy, Jr.	30 Edgewater STREET ADDRI		eld, RI 02879	ZIP CODE
Jane C. Healy	Same as above			
SECRETARY Downing	STREET ADDRI		field, RI 02879	Z!P CODE
Sally H. Davis TREASURER	STREET ADDRESS		CITY/STATE	ZIP CODE
Freeman A. Healy	30 Edgewater	Road, Wakefi	eld, RI 02879	
NAME	THE NAMES OF THE	DIRECTORS ARE:	CITY/STATE	
Freeman A.Healy, Jr.			eld, RI 02879	ZIP CODE
Jane C. Healy	-	Road, Wakefi	eld, RI 02879	ZIP CODE
NAME.	STREET ADDRE	ESS	CITYISTATE	ZIP CODE
NUMBER OF SHARES AUTHORIZED (Rider may be	attached)	NUMBER OF SHARES IS	SSUED AND OUTSTANDING (Ride	er may be attached)
Number of Shares Class / Series		Number of Shares	Class / Series	
100 Common		100	Common	
Date February 6	Fream	A Healy Jal	g. f1	
Form 31 1:95	PRINT OR TYPE TELLE OF OPEC	: NAME OF OFFICER/SIGNING	President	
	TED REGISTERED AGEN		OF PROCESS:	·

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

ARCHIBALD B. KENYON, JR., 138 OLD TOWER HILL ROAD NAKEFIELD RI 08879 By O hay 2/833

Filing Fee \$50,00 Payable to: Secretary of State

PLEASE TYPE or PRINT

File Annualty LLC, Sept. 1 - Nov. 1 CORP, Jun. 1 - March 1

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

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID:	Annual Report for the year:
	H.N.S., INC.
Name of Business Entity:	
Phod	Basiness Entity is (check one)
Business entity organized under the laws or the State of: Rhod	[X] Business Corporation (See RIGL Chapter 7-1-1)
Federal Taxpayer Identification Number.	[] Professional Service Corporation (See RIGL Chapter 7-5-1)
For foreign entity, address and telephone number of principal office	
	Name, title and mailing address of contact person to whom communications may be directed
	Freeman A: Healy, Jr
- <u>-</u>	
Phone: $\frac{\hat{\zeta}}{\zeta} = -\frac{\hat{J}}{\zeta}$	<u></u>
Address and telephone of the principal office of business entity in	Rhode
Island (Provide street address - Not P.O. Box)	Brief statement of the character of business conducted in Rhode Island:
133 Old Tower Hill Road	<u>To operate a newstand and </u>
Wakefield, RI 02879	convenience_stand
	Date of Organization $\frac{113196}{13}$
Phone (401) 789-0217	Date of Qualification to do business in Rhode Island (if foreign entity):
	AMES OF THE OFFICERS ARE:
TO THE EXECUTIVE DEFICER OR X SRESIDEST (Clean Clean	STREET ADDRESS CITYSTATE ZIF CODE
Freeman A. Healy, Jr. 30 Ed	dgewater Road, Wakefield, RI 02879
Jane C. Healy 30 Ed	dgewater Road, Wakefield, RI 02879
CUSTODIAS OF RECORDS OF X SECRETARY TO SELECTE	STREET ADDRESS CITYSTATE 7IP CODE
Sally H. Davis 212	Briarwood Drive, Wakefield, RI 02879
	dgewater Road, Wakefield, RI 02879
THE NA	AMES OF THE DIRECTORS ARE: STREET ADDRESS CONSTAIL 7D CODE
Freeman A. Healy, Jr. 30 E	dgewater Road, Wakefield, RI 02879
NAME	dgewater Road, Wakefield, RI 02879
	STREET ADDRESS CITY TATE ZIPCOD
NAME.	STREET ACIDERESS
A CONTRACTOR OF A CONTRACTOR O	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER OF SHARES AUTHORIZED (If Applicable)	CINTER OF SHARES ISSUED AND OF ISSUED
NUMBER	NUMBER
100 CLASS Common	CLASS Common MAR 2.5 123 75
SERIES	SERIES By
	PAR VALUE OR No Par Value
PAR VALUE OR No Par Value WITHOUT PAR	WITHOUT PAR
W las	
Date March 23 1994	By Freeman Q. Hearly
	Freuman A. Healy J.
	PRINT OR TO PEUPANE OF OFFICER STONESG / 1
	Transfer of Grencher Michigan
Fem 31 194	D OD DECIDENT ACEST POD CUBUICE OF BROOFICE.
DESIGNATED REGISTERE	D OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903 0037020

Corporate ID. 0037	7020	Annual Report fo	the year 1993
FIRST: The name of	of the corporation is	H.N.S., INC.	
SECOND: It is inco	rporated under the laws of	Rhode Island	
	of business, briefly stated, is renience store	To operate a ne	ewsstand and
FOURTH: If foreign	n corporation, address of its	principal office	······································
Fifth: Business ad	ldress in Rhode Island	133 Old Tower HII	ll Road 379
SIXTH: Names and	l addresses of its directors at		(Attach rider if necessary) ting number, street, zip code)
Freeman A. Heal	y, Jr. Director	31 Edgewater F	Road, Wakefield, RI 02879
Jane C. Healy	Director	31 Edgewater F	Road, Wakefield, RI 02879
	Director		
Freeman A. Heal	y, Jr. President	Same as above	
Jane C. Healy	Vice Presi	dent Same as above	
Sally H. Davis	Secretary	212 Briarwood	Drive, Wakefield, RI
Freeman A. Healy	y, Jr. Treasurer	Same as above	
Seventh: Number	of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
100	Common		No Par Value
EIGHTH: Number of	of Shares issued:	PAID	Par Value
No. of Shares	Class SECIV	PA10 V28 1993 Series OF STATE	or statement that shares are without par value
100	Common	UFSTATE	No Par Value
Dated January 25		H.N.S., INC (Name of Corporation)	
		By Freeman a.	Healy
(Report must be	signed by an officer)	Title Fres	′ /

State of Rhode Island and Providence Flantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

14402 R.D.

Corporate ID	00370	20	Annua	l Report for the	year	
First:		poration is				
Second		under the laws of			•	
Third:	Character of busine convenience s	ss, briefly stated, is	to opera	te a newsst	and and	
Fourth	: If foreign corpora	tion, address of its prin	ncipal office			······································
Г (БТИ:	Business address in I	Rhode Island	133 Old :	Tower Hill	Road	
			Wakefield	1, RI 0287	9	.4
Ѕіхтн:	Names and addresse	s of its directors and o	officers:	Address (including nun		der if necessary)
Freeman	A. Healy, Jr.	Director	31 Edgewa	ater Road,	Wakefield	RI 02879
Jane C.	Healy	Director	31 Edgewa	ater Road,	Wakefield,	RI 02879
***************************************		Director	**-+->			
Freeman	A. Healy, Jr.	President	31 Edgewa	ater Road,	Wakefield,	RI02879
Jane C.	Healy	Vice Presiden	nt 31 Edgewa	ater Road, J	Wakefield,	RI 02879
Sally H.	Davis	Secretary	212 Brian	cwood Drive	, Wakefiel	d, RI 0287
Freeman	A. Healy, Jr.	Treasurer	31 Edgewa	ater_Road	Wakefield,	RI028.79
SEVENTH	: Number of Share	s authorized:			Par Val or statemer	
No. of Sh	ares	Class	ي الحراد	AID	shares are v	rithout
100) C	ommon	MAR	0 3 1992	No Par	Value
Еібити:	Number of Shares	issued:	SEC'Y	OF STATE	Par Val or statemer	= _
No. of Sh.	ares	Class	Scrie	s	shares are v par val	
100	C	ommon			No Par	Value
Dated Feb	ruary 29,		H.N.S., IN Name of Corporation)	ic.	······································	
(R)	enart must be signed by a	By an officer) Ti	y Sally	H. Laur tari	v	

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0037020		Annual Repor	rt for the year	1991	
FIRST: The name of the corporation is			H.N.S., INC			
Second:	It is incorporated under	the laws of	Rhode Island			
	Character of business, brie		To operate a ne			
Fourth	If foreign corporation, ac	ddress of its p	rincipal office			
	Business address in Rhode					
133	Old Tower Hill Ro	oad, wake	ileid, Ri U287	,	•••••	•••••
Ѕіхтн:	Names and addresses of its	directors and		including number, stre	(Attach rider if no cet, zip code)	ecessary)
Freeman	A. Healy, Jr.	Director	31 Edgewater 1	Road, Wake	field, RI	02879
Jane C.	Healy	Director	31 Edgewater I	Road, Wake	field, RI	02879
***************************************		Director		•••••		•••••
Stephen	Davis	President	212 Briarwood	Drive, Wa	kefield, F	02879
Sally Da	vis	Vice Presid	ent 212 Briarwood	Drive, Wa	kefield, F	RI 02879
Sally Da	vis	Secretary	212 Briarwood	Drive, Wa	kefield, F	RI 02879
Stephen	Davis	Treasurer	212 Briarwood	Drive, Wa	kefield, F	RI 02879
SEVENTE	: Number of Shares auth	orized:			Par Value or statement that	
No. of Sh	ares Class		DAID Series		shares are without par value	
100	Commo	n	FEB 4 1991		No Par Val	lue
Еіднтн:	Number of Shares issued	^ ;	DIV OF STATE		Par Value or statement that	
No. of Sh	ares Class		Series		shares are without par value	
100	Commo	n			No Par Val	lue
Dated Janu	nary 19, 19		H.N.S., Inc.	•		
			By Flylus a	- Davis	•••••••••••••••••••••••••••••••••••••••	
(R	eport must be signed by an office	er)	Title Pres.	•••••••••••••		

Form 31 1/85

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID003.7030		Annual Report for the year 1990		
FIRST: The name o	f the corporation is	H.N.,:5,INC.,		
SECOND: It is incor	porated under the laws of	Rhode Island		
THIRD: Character of convenience		To operate a newssta		
FOURTH: If foreign	corporation, address of its p	rincipal office		
Fifth: Business add	dress in Rhode Island			
133 Old To	ower Hill Road, Wak	efield, RI 02879		
SIXTH: Names and	addresses of its directors and	d officers: Address (including numb	(Attach rider if necessary) er, street, zip code)	
Freeman A. Healy	Jr. Director	31 Edgewater Road, N	Wakefield, RI 02879	
Jane C. Healy	Director	31 Edgewater Road, N	Wakefield, RI 0287	
	Director			
Stephen Davis	President	212 Briarwood Drive	, Wakefield, RI	
Sally Davis	Vice President	ent 212 Briarwood Drive	, Wakefield, RI	
Sally Davis	Secretary	212 Briarwood Drive	, Wakefield, RI	
Stephen Davis	Treasurer	212 Briarwood Drive	, Wakefield, RI	
	of Shares authorized:	,	Par Value or statement that shares are without	
No. of Shares	Class	Series	par value	
100	Common	PAID	No Par Value	
Еібнтн: Number o	f Shares issued:	JAN 20 1000	Par Value or statement that	
No. of Shares	Class	JAN 20 1990	shares are without par value	
100	Common	·	No Par Value	
Dated January 19		H.N.S., INC. (Name of Corporation) By Hyllen C. W.		
(Report must be s	signed by an officer)	Title Mres.		

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE. RHODE ISLAND 02903

	100 NORT	TIONS DIVISION H MAIN STREET RHODE ISLAND 02903	al
Corporate ID	037020	Annual Report for the y	ear 1989 yv
FIRST: The nam	e of the corporation is	11 M of This	
SECOND: It is in	corporated under the laws of	Rhode Island	
THIRD: Characte	er of business, briefly stated, is.	to operate a newstand	and
conven	ience store		••••••
FOURTH: If foreign	ign corporation, address of its p	orincipal office	
FIFTH: Business	address in Rhode Island		
133 01	ld Tower Hill Road, W	Jakefield, Rhode Island	02879
SIXTH: Names a	nd addresses of its directors and	d officers: Address (including numb	(Attach rider if necessary) er, street, zap code)
Freeman A. He	ealy, Jr. Director	31 Edgewater Road, W	akefield, RI
	Director		
	Director		
Freeman A. He	ealy, Jr. President	31 Edgewater Road, W	akefield, RI
	Vice Preside	ent	
Jane C. Healy	Z Secretary	31 Edgewater Road, W	akefield, RI
Freeman A. He	ealy, Jr. Treasurer	31 Edgewater Road, W	akefield, RI
SEVENTH: Numb	er of Shares authorized:		Par Value
No. of Shares	Class	Series PAID	or statement that shares are without par value
100	Common	Han 2.9 1989	No Par Value
EіGHTH: Numbe	r of Shares issued:	SECV OF STATE	Par Value
			or statement that shares are without
No. of Shares	Class	Series	par val ue
100	Common		No Par Value
Dated February		H.N.S., INC.	
		(Name of Corporation)	
/n	i i i i i i i i i i i i i i i i i i i	By 7. G Healy of	
(Keport must b	be signed by an officer)	Title Pres.	······

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 370.20	Annual Report for	the year
FIRST: The name of the corporation is	Hemeter INC.	
SECOND: It is incorporated under the laws	of	ode lalend
THIRD: Character of business, briefly stated	l, is To operate a News	stand and
convenience store.		
FOURTH: If foreign corporation, address of	its principal office	
FIFTH: Business address in Rhode Island		
133 Old Tower Hill Re	oad, Wakefield, RI 028	379
SIXTH: Names and addresses of its directors		(Attach rider if necessary)
Freeman A. Healy, Jr. Directo	or 31 Edgewater Roa	ad, Wakefield, RI
Directo	or	
Directo	or	
Freeman A. Healy, Jr. Preside	nt 31 Edgewater Ro	oad, Wakefield, RI
Vice Pr	esident	
Jane C. Healy Secreta		d, Wakefield, RI
Freeman A. Healy, Jr. Treasur	er 31 Edgewater Roa	d, Wakefield, RI
SEVENTH: Number of Shares authorized:		Par Value
No. of Shares Class	Series	or statement that shares are without par value
100 Common		No Par Value
	PAID	4
Еіднтн: Number of Shares issued:	MAR 1.7 1988	Par Value or statement that
No. of Shares Class	SAM CAR IST A Series	shares are without par value
100 Common		No Par Value
ated January 21, 19 88	(Name of Corporation)	
	By Freeman C. Ha	rly f
(Report must be signed by an officer)	Title President	<i>/</i> •

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID37020	Annual Report for the year1987
FIRST: The name of the corporation isH.N.	S., INC.
SECOND: It is incorporated under the laws of	Rhode Island
THIRD: Character of business, briefly stated, is	To operate a Newsstand and
convenience store	
FOURTH: If foreign corporation, address of its pr	rincipal office
FIFTH: Business address in Rhode Island	eld, Rhode Island
	per .
SIXTH: Names and addresses of its directors and	Officers: (Attach rider if necessary) Address (including number, street, zip code)
Freeman A. Healy, Jr. Director	31 Edgewater Road, Wakefield, RI
Director	
Director	
Freeman A. Healy, Jr. President	31 Edgewater Road, Wakefield, RI
	ent
Jane C. Healy	31 Edgewater Road, Wakefield, RI
Freeman A.Healy, Jr. Treasurer	31 Edgewater Road, Wakefield, RI
SEVENTH: Number of Shares authorized:	Par Value
No. of Shares Class	or statement that shares are without Series par value
100 Common	No Par Value
Еіднтн: Number of Shares issued:	Par Value
No. of Shares Class	PAID or statement that shares are without par value
100 Common	U 3 198/
SEC'Y	OF STATE No Par Value
Dated 19 87	H.N.S., INC.
	•
(Panort must be sized by a = -00)	iy Freeman a Heal of
(Report must be signed by an officer) T	HIC GOTT