

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

filing Period: January I FORM MUST BE TYPED IN	BLACK)	· · · · · · · · · · · · · · · · · · ·		organisation of the second		
I. Corporate ID No.	2. Name of Corp		•			
104640		RANCES, INC.	10:	State	Zip	
3. Street Address Principal Bu 133 OLD TOWER HI			City WAKEFIELD	RI	02879-	
	. LL RD	5. State of Incorporati			6. SIC Code	
1. Business Phone No.		RHODE ISLAN			0	
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Brief Description of the Ch TO OWN AND OPERATE	A CHARTER PI	SHING BOAT.				
8. NAMES AND ADDRE	SSES OF THE OF	FICERS ("X" BOX FOR A	TTACHMENT) FILL IN SP Vice President Name		TACHMENTS	
Francis W. Bloun	t, Jr.		. Christine Blour	nt		
Street Address			Sircel Address			
PO Box 3724			. PO Box 3724			
City	State	Zip	City	State	Zip	
Peace Dale	RI	02883	Peace Dale	RI	02883	
ecretary Name			Treasurer Name	. •		
Christine Blount			Francis W. Blou	int, Jr.		
Street Address			Street Address			
PO Box 3724			.PO Box 3724			
City	Store	Zîp	City	State	Zip	
Peace Dale	RI	02883	.Peace Dale	RI	02883	
9. NAMES AND ADDRI	ESSES OF THE DI	RECTORS CX" BOX FO	Director Name	SPACES BEFORE USING	ATTACHMENTS	
Francis W. Bloum	it; Jr.	•	*Christine Blount			
Street Address			Street Address	Street Address		
PO Box 3724			PO Box 3724	PO Box 3724		
City	State	Zip	·City	State	Zip	
Peace Dale	RI	02883	Peace Dale	RI	02883	
Director Name	.		Director Name			
Sircei Address			Street Address			
City	State	Zip	.City	State	Zip	
10. SHARES AUTHOR	ZED ("X" BOX FO	RATTACHMENT)		X" BOX FOR ATTACHME	νη. □	
AUTHORIZED SHARES			ISSUED SHARES		l One Volum	
Number of Shares	Class/Series	Par Value	Number of Snares	Class/Series	Par Value	
100 NO PAR VALUE			100	Common	No Par	
This report must be sig	ned in ink by eit	her the President, Vice	President, Secretary, Ass.	istant Secretary, Treas	urer, Receiver or Tru	
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1 0	4 6 4 0			erjury, I declare and affirm		
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File Date	D 1 Δ 2005		Signature of Officer	e kjune_	Date ////	
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		~	VICE ONLA	edent		
FOR SECRETARY OF STA	ITE USE ONLY		Title of Officer		Form 630	



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

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

	ROFIT CORPORATION	ANNUAL REPORT FOR THE Y	EAR <u>2004</u>
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iling Period: January 1 · FORM MUST BE TYPED OR PR		Filing Fee: \$50.00			
Corporate ID No.	2. Name of Corpo	ration			
104640	CAPTAIN	FRANCES, INC.			
Street Address Principal Busines		_	City Wakefield	State	Zip
	Business Phone No. 5. State of Incorporation			RI	02879 6. SIC Code
Business Phone No. 789–0217		1 .			o. Sic class
Brief Description of the Character of Business Conducted in Rhode Island			<u>lo </u>		<u> </u>
TO OWN AND OPERA	ITÉ A CHARTER F	ISHING BOAT.			
. NAMES AND ADDRESSI	S OF THE OFFIC	ERS: ("X" BOX FOR AT	TACHMENT) [FILL IN SPA	CES BEFORE USING	G ATTACHMENTS
resident Name			Vice President Name		
Francis W. Blo	unt, Jr.	<u> </u>	Christine Blo	unt	
rreei Address PO Box 3724			Street Address PO Box 3724		
ily	State	ZID	: City	State	Zip
Peace Dale	RI	02883	Peace Dale	RI	02883
rcretary: Name			Treasurer Name		
Christine Blou	nt		Francis W. Bl	ount, Jr.	
rect Address			Street Address		
PO Box 3724		la.	PO Box 3724	Terre	7/0
ny Peace Dale	State RI	02883	: <i>City</i> : Peace Dale	State RI	zφ 02883
			ATTACHMENT) FILL IN S.		
irector Name			Director Name	•	•
Francis W. Blo	unt, Jr.		Christine Blount		
reet Address			Street Address		
PO Box 3724			PO Box 3724	Low	7/5
ny Peace Dale	State RI	2ip 02883	City Peace Dale	State	^{zφ} 02883
Virector Name	1) 02003	Director Name	1	
treet Address			Street Address		<u>-</u>
		Ta.	:	I com	7/6
<i>(tty</i>	State	Zip	City	State	Zip
0. SHARES AUTHORIZEI	 ("X" BOX FOR	 ATTACHMENT) □	in 11. SHARES ISSUED ("X	 " BOX FOR ATTACE	 # <i>MENT</i>)
UTHORIZED SHARES	(ISSUED SHARES		
umber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
400 NO BAD VALUE	-		100	Common	No Dor
100 NO PAR VALUE			100	Common	No Par
				_1	
This report must be	e signed in ink by	y either the President, Vic	e President, Secretary, Assistant	Secretary, Treasurer,	Receiver or Trustee
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			Linder penalty of perior	v. I declare and affirm t	that I have examined this
+ Tilleri	1 0 4 6 A	□□□□			itements, and that all state
,	2~	رّ	contained herein are tru		1 1 .
File Date 1-27-04			(Kustine	Bount	1/31/04
10) 5 8		Signature of Officer		Date
Check No		—	Christine B	lount	
Ву:	di		Print or Type Name of O	fficer	
ク· 			VICE-RELEID	ent	
FOR SECRETARY OF	FOR SECRETARY OF STATE USE ONLY			- · · ·	·

Francis W. Blount, Jr.

Peace Dale

Director Name

RI

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

401-222-3040

02880

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 CAPTAIN FRANCES, INC. 104640 City . State 3. Street Address Principal Business Office 02879 Wakefield RI 133 Old Tower Hill Road 5. State of Incorporation 4. Business Phone No. 0 789-0217 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island To own and operate a charter fishing boat 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Pretident Name

Christine Brount

Peace Dale

Director Name

RI

Street Address PO Box 3724 PO Box 3724 State 02880 Peace Dale RI 02880 Peace Dale RITreasurer Name Secretary Name Francis W. Blount, Jr. Christine Blount Street Address Street Address PO Box 3724 PO Box 3724 City State 02880 RI 02880 Peace Dale RI Peace Dale FILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **Director Name** Christine Blount Francis W. Blount, Jr. Street Address Street Address PO Box 3724 PO Box 3724 State Zip Cltv City

Street Address Street Address City State Zip Zip City State 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

02880

ISSUED SHARES AUTHORIZED SHARES Par Value Par Value Number of Shares Class/Series Number of Shares Class/Series

No Par 100 NO PAR VALUE 100 Common

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.

FOR SECRETARY OF STATE USE ONLY Form 630 12/02

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

2002 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _ Filing Period: January 1-March 1 • Filing Fec: \$50.00

401-222-3040

(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No.	2. Name of Corporat	on	· · · · · · · · · · · · · · · · · · ·		
104640	CAPTAIN FR	ANCES, INC.	• •		
3. Street Address Principal Business		·	City	State '	Zip
133 Old Tower 4. Business Phone No.	Hill Road	5. State of Incorporation	Wakefield	RI	02879 6. SIC Code
789-0217 2. Brief Description of the Character	of Business Conducted in	RHODE ISLANI Rhode Island	D		0
To own and ope 8. NAMES AND ADDRES			CHMENT) FILL IN SPACES B	EFORE USING ATTACH	IMENTS
President Name			Vice President Name		
Francis W. Blo Street Address	ount, Jr.		Christine Blo	unt	
PO Box 3724			PO Box 3724		
City	State	Zip	City	State	Zip
Peace Dale . Secretary Name	RI	.02880	Peace Dale Treasurer Name	RI	02880
Christine Blou Street Address	int		Francis W. Blogsteet Address	unt, Jr.	
PO Box 3724			PO Box 3724		
City	State	ZIp	City	State	Zip
Peace Dale 9. NAMES AND ADDRESS Director Name	RI SES OF THE DIRE	02880 CTORS ("X" BOX FOR AT	Peace Dale TACHMENT) FILL IN SPACES Director Name	RI BEFORE USING ATTA	02880 CHMENTS
Francis W.Blou	int, Jr.		Christine Blou	nt	
PO Box 3724			PO Box 3724		
City	State	Zip	City	State	Zip
Peace Dale Director Name	RI	. 02880	Peace Dale Director Name	RI .	02880
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZEI AUTHORIZED SHARES	D (*X* BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (*X	* BOX FOR ATTACHMENT)	•
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			100	Common	No Pa

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



TH 0	1-83-62	
File Date:	1152	
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 all statements contained herein are true and correct.

rint or Type Name of Officer	 <u> </u>

Title of Officer **◆**> 5



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 2001

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

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Filing Period: January 1-March 1 • Filing Fee: \$50.00					INSTRUCTIONS	
(FORM MUST BE TYPED IN BLAC	CK)					
1. Corporate ID No.	2. Name of Corpore	ation				
104640	CAPTAI	N FRANCES, IN	īĊ.			
3. Street Address Principal Business (Office		City	State	Zip	
133 Old Tower H	ill Road		<u> </u>	_ RI	02879	
4. Business Phone No.	•	5. State of Incorporation	ол ·		6. SIC Cade	
789-0217		Rhode	Island		2246	
7. Brief Description of the Character	of Business Conducted	in Rhode Island				
To own and oper						
8. NAMES AND ADDRESS	SES OF THE OFF	ICERS ("X" BOX FOR ATT	ACHMENT) FILL IN SPACES	BEFORE USING ATTACH	MENTS	
President Name		•	Vice President Name			
Francis W. Blou	nt, Jr.		Christine Blo	unt		
Street Address	'		Street Address			
PO Box 3724			PO Box 3724		· · ·	
City	State	' Zip	City	State	Zip	
Peace Dale	RI	02880	Peace Dale	RI	1 02880	
Secretary Name			Treasurer Name			
Christine Bloun	it		Francis WBlo	ount		
Street Address			Street Address	•		
PO Box 3724			PO Box 3724			
City	State	Zip	City	State	Zip	
Peace Dale	RI	02880	Peace_Dale	ı RI	02880	
9. NAMES AND ADDRESS	ES OF THE DIR	ECTORS ("X" BOX FOR	TTACHMENT) (FILL IN SPACE	S BEFORE USING ATTA	CHMENTS	
Director Name			Director Name			
Francis W. Blou	ınt, Jr		Christine Bloom	ount		
Street Address		· 	Street Address			
pO Box 3724	_		PO Box 3724_			
City	State	Zip	. City	State	Zip	
Peace Dale	RI	02880	: Peace Dale	RI	02880	
Director Name			Director Name			
Street Address			. Street Address			
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City	State	Zip	City	State	Zip	
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10. SHARES AUTHORIZEI	D ("X" BOX FOR AT	TACHMENT)	11. SHARES ISSUED (X BOX FOR ATTACHMENT)		
AUTHORIZED SHARES			ISSUED SHARES			
Number of Shates	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
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inis report must be sign	eu in ink by eit	mer the President, Vic	ce President, Secretary, Assi	stant secretary, iteasu	iei, neceiver or muste	

-		Under penalty of perjury, I declare and affirm that I have examined
ille Date:	4-13-01	this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
the Date:	//33	Signature of Officer Date
y;	<u> </u>	Print or Type Name of Officer
OR SECRETARY O	F STATE USE ONLY	Arisabert. The 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 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00



1. Corporate ID No.	2. Name of Corporati	on the second	The second secon		
104640 3. Street Address Principal Business 133 Old Tower	Office	ANCES, INC.	City Wakefield	State RI	z _{Ip} 02879
4. Rusiness Phone No. 789-0217 7. Brief Description of the Character					6. SIC Code
To own and ope					11.452.000
8. NAMES AND ADDRESS	SES OF THE OFFIC	CERS ("X" BOX FOR ATTACK	(MENT) FILL IN SPACES BE	FORE USING ATTACH	—
Francis W. Blo	unt, Jr.		Christine Bl	ount	
Street Address			Street Address		
PO Box 3724	State	Zip	PO Box 3724	State	Zip
Peace Dale Secretary Name	RI	02880	Peace Dale	RI	02880
Christine Blou	int		Francis W. B	lount, Jr.	
PO Box 3724 _	State	Zip	PO Box 3724	State	Zip
P. Dale	RI	02880	P. Dale	RI	02880
9. NAMES AND ADDRESS Director Name	SES OF THE DIRE	CTORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES I	BEFORE USING ATTA	CHMENTS
Francis W. Blo	ount, Jr.		Christine Bl	ount	
PO Box 3724			PO Box 3724		
City	State	Zip	City	State	Zip
Peace Dale Director Name	RI	. 02880	Peace Dale Director Name	RI	02880
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE.	D (*X* BOX FOR ATTA	CHMENT)	11. SHARES ISSUED ("X"	BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value
100 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

File Date:	* 1 0 4 6 4 0 * 2/16/00
Check No.:	1023
Ву:	Z.
,	Y 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 berein are true and correct.

Austria,	Voient	2/14/00
Signature of Officer	Date	
Officer	UCL	Print or Type Name of United
Title of Officer	Titl	