Form 630 12/01

FOR SECRETARY OF STATE USE ONLY

I Comment ID M	BLACK)				····
I. Corporate ID No. 86948	2. Name of Corpor Grey Ledge i	ation Holdings, Inc.			
3. Street Address Principal Bu		<u> </u>	Cur	State	Zip
21 CIRCUIT DRIVE	QUONSET POIN	T	NORTH KINGSTOWN	RI	02852
4. Business Phone No.		5. State of Incorporation		• ,	6 SIC Code
4012957800		RHODE ISLAND		,	5710
7 Brief Description of the Ch. TO OWN AND LEASE E		fucted in Rhode Island		•	
8: NAMESAND/ADDRE	SSESO #### 011	ICERS EXTROXFORATI	ACHMENT: FILE IN SPACE	es before usingat	TACHMENTS.
Steven M. Kenned	У		, rough regiment frame		
Street Address			Street Address		
21 Circuit Dr.,	Quonset Point		•		
Сіту	State	Zip	City	State	Zıp
N. Kingstown	RI	02852	•		
Secretary Name		, , , , , , , , , , , , , , , , , , , ,	Treasurer Name		
Steven M. McInni	s		Steven M. Kennedy		
Street Address			Street Address		·
38 Bellevue Aven	ue, Suite H		.21 Circuit Dr., Q	uonset Point	
City	State	Zip	City	State	Zip
Newport	RI	02840	.N. Kingstown	RI	: 02852
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Director Name			Director Name		
Steven M. Kenned	У		·		
Street Address			Street Address		
21 Circuit Dr.,	Quonset Point				
City	State	Zıp	City	State	Zip
N. Kingstown	RI	02852	· ·		
Director Name			Director Name		
		····	<u>, </u>	<u></u>	
Street Address			·Street Address		
Ċ.	State .	17	.Cirv	State	Zip
City	Sittle .	Zıp	·	Simile	, در ه
in the latest the control of the con			7-7-0 mm man to come - 2-1/m	}	
	ZED X X BOX FOR	ATTACHMENT)	11. SHARES ISSUED ("X")	OXFORATIACHME	O.L.J. Williams
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This by Claster	Class der les				1
8,000 \$.01 PAR VALU	JE		100	Common	\$.01 Par
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			<u> </u>	<u></u>	
This report must be sig	ned in ink by eith	er the President, Vice Pi	resident, Secretary, Assista	nt Secretary, Treas	urer, Receiver or Tru.
AL EBRIA RINIS	IRIN RIFEL (B)			•	
8 6	1811 818 81 181 9 4 8	•	Under penalty of perjui	ry. I declare and affirm	that I have examined
-	-		this report, including a		
*0C040 DBC 04/07/0	OC. 40.25 DN4	\neg	and that all statements		
86948 DBC 01/27	5-65-48:35 PM	·.	-A-G. 11	Ku H	3/17/25
File Date		-20	1/1/11/19	Jun/	1110)
APR 2	3 7 2005 {2	,239	Signature of Officer	` .V	Date
Check No.	7 1/-		Şiteven M. Ke		
i <u>—</u>	16 <i>N</i> -5	i	Print or Type Name of O	llicer	
_{By} . By	し <i>ノ</i> ・ノ	i	Trum or type name by by	y.cc. •	



FOR SECRETARY OF STATE USE ONLY

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 <u>-2004</u>

FORM MUST BE TYPED I. I. Corporate ID No.	2. Name of Corpor	utlon			· · · · · · · · · · · · · · · · · · ·
86948		ullon Holdings, Inc.			
B. Street Address Principal B.			City	State	Zip
21 CIRCUIT DRIV		T	NORTH KINGSTOWN	RI	02852
I. Business Phone No.		5. State of Incorpora			6. SIC Code
401 295-7800		RHODE ISLA			5710
Brief Description of the CI TO OWN AND LEASE	REAL ESTATE.	miciea in Knode Island			
8. NAMES AND ADDR	esses of the off	ICERS ("X" BOX FOR	ATTACHMENT) FILL IN SPACE	S BEFORE USING AT	TACHMENTS
Steven M. Kenned	iy		•		
Street Address			Sircei Address		-
21 Circuit Dr.,	Quonset Point		•		
City	State	Zip	City	State	Zip
N. Kingstown	RI	02852	•	1	
ecretary Name			Treasurer Name		
Steven M. McInni	s		Steven M. Kennedy		
Street Address			Street Address		-
38 Bellevue Ave			.Same as above		
City	State	Zip	*City	State	Zip
*	RI	02840	,		1-7
Newport		4 '	OR ATTACHMENT) FILL IN SPA	CES BEFORE HEINO	ATTACHMENTS
9. NAMES AND ADDR Director Name	F22F2 OF THE DIK	ECTORS ("X" BOX FO	Director Name	CES BEFORE USING	ATTACHMENTS
	•		. Director Nome		
Steven M. Kenned	у				
Sircei Address			Street Address		
Same as above			<u> </u>		
City	State	2.ip	•City	State	Zip
			•]
Director Name	• • • • • • • • • • •	• • • • • • • • • • •	Director Name		
			•		
Sircei Address			Street Address		
			•		
City	State	Zip	.City	State	Zip
•			•		
10. SHARES AUTHOR	17 FD 7"3" ROX FOR	ATTACHMENT)	11. SHARES ISSUED ("X" B	OX FOR ATTACHME	Vn Π
AUTHORIZED SHARES	TEXT.D [X BOX 1 OK	ATTACHMALTY_	ISSUED SHARES		
Number of Shures	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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8,000 \$.01 PAR VAL	ŲE		100	Common	\$.01 Par
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<u></u>			1	1	
This report must be si	gned in ink by eith	er the President, Vic	e President, Secretary, Assista	nt Secretary, Treas	urer, Receiver or
	L 6148 1814 BY BY 1814 IS A				
* 8	6 9 4 8 *		Under penalty of perjur	ry, I declare and affirm	that I have examined
·			this report, including or	ny accompanying scho	dutes and statements.
86948 DBC10/1/02	2A·03·A2 D1A		and that all statements	contained herein are ti	rue and correct
			100111	124 4 1	vas. 1/160
File Date 3 .	<u>۲۷۰ ده</u>	_	(Ihm, I'l, +	Journ 1	
	11217		Signature of Officer	' / _	Date
Check No.		_	S∜even M. Ke	nne¢%	
		ī	+ f =	1/*	

President

Form 630 12/01



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 IN BI	LACK)				<u> </u>
I. Corporate ID No.	2. Name of Corpora				
86948	Grey Ledge H	loldings, Inc.			
3. Street Address Principal Busine	ess Office		City	State	Zip
21 CIRCUIT DRIVE (QUONSET POIN	r 	NORTH KINGSTOWN	RI	02852
1. Business Phone No.		5. State of Incorporati			6. SIC Code
401 295-7800		RHODE ISLAN	D		5710
Brief Description of the Character TO OWN AND LEASE REA	cter of Business Cond L ESTATE.	ucted in Rhode Island			
8. NAMES AND ADDRESS President Name	ES OF THE OFF	CERS ("X" BOX FOR A	TTACHMENT) FILL IN SPACE	S BEFORE USING AT	TACHMENTS
Steven M. Kennedy			•		
Street Address			Street Address	_	
21 Circuit Dr., Qu	onset Point		•		
City	State	Zip	City	State	Zip
N. Kingstown	RI	02852	•		
ecretary Name		'	Treasurer Name	• • • • • • • • •	
Steven M. McInnis			Steven M. Kennedy		
Street Address			* Street Address		
38 Bellevue Ave.			.Same as above .	•	
City	State	Zip	'City ·	State	Zip
Newport	RI	02840			'
A NAMES AND ADODES		ſ	RATTACHMENT) FILL IN SPA	CES BUFORE USING	ATTACHMENTS
9. NAMES AND ADDRESS Director Name	SES OF THE DIK	SCIURS TAT BOX FOR	Director Name	CISS BET ONE DOTTO	
		,	•	**)	* * * * * * * * * * * * * * * * * * * *
Steven M. Kennedy	<u> </u>		Come Address	·	· · ·
Sircet Address			Street Address	•	• • •
Same as above 🕠				1:	
City	State	Zιp	·City	State	Zip
Director Name Street Address		<u></u>	· Street Address		
	10-2	T-7:-	City	State	Zip
City	State	Zip	•	- Cont	
	<u> </u>			OV COR ATTACHMEN	
10. SHARES AUTHORIZI	ED ("X" BOX FOR	ATTACHMENT) U	11. SHARES ISSUED ("X" B	OX FOR ATTACHME	<u> </u>
AUTHORIZED SHARES		Par Value	ISSUED SHARES Number of Shares	Class/Series	Par Value
Number of Shares	Class/Series	rar value	Trumber by Shares	Citabiation	
8,000 \$.01 PAR VALUE			100	Common	\$.01 Par
L			1		D
This report must be signe	ed in ink by eith	er the President, Vice	President, Secretary, Assista	nt Secretary, Treas	urer, Receiver or Trust
,	•				
				•	
					and the second second
* 8 6	9 4 8 *		Under penalty of perjur	ry, I declare and affirm	that I have examined
			this report, including a	ny accompanying sche	eduics and statements,
86948 DBC10/1/024:	03:42 PM		and that all statements	1 / // .	rue and correct.
1 9/15	12.2		71/ Ma	Lucy/	~ 1/2/03
File Date 319	(0)	- l ··	(Vin 14	c / //	10/10
	a-1	'	Signature of Officer	//	Date / /
Check No.	> /	_	`Steven M. Ke		
[fγ.		Print or Type Name of O	Jicer	<u> </u>
By:	W	_ <i>Y</i>	President		
i .		. /			
FOR SECRETARY OF STATE	E USE ONLY	√	Title of Officer		Form 630 12

2. Name of Corporation

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

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

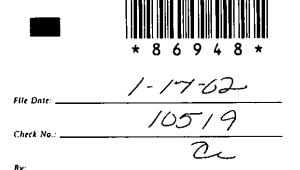
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

Street, Providence, RI 02903-1333 401-222-3040

86948	Grey Ledge Hole	dings, Inc.				
3. Street Address Principal Business Off	ice		City		State	Zip
21 Circuit Drive, 4. Business Phone No.	Quonset Point	5. State of Incorporation	North I	(ingstown	RI	02852 6. SIC Code
401 295-7800 7. Brief Description of the Character of	Business Conducted in Riu	RHODE ISLAND ode Island				5710
To own and lease 1 8. NAMES AND ADDRESSE President Name		RS (*X* BOX FOR ATTACHI	MENT) FIL Vice Presiden		ORE USING ATTACH!	MENTS
Steven M. Kennedy Street Address			Street Address	ı		
21 Circuit Drive,	Quonset Poin	t Zip	City		State	Zip
North Kingstown Secretary Name	RI	02852	Treasurer Na	пе		
Steven M. McInnis Street Address			. Steve Street Addres	n M. Kennedy	/ ₁	
38 Bellevue Ave.	State	ZIp	21 Cir	cuit Drive,	Quonset Point State	Zip
Newport 9. NAMES AND ADDRESSE Director Name	RI S OF THE DIRECT	02840 ORS (*x* box for attac			RI efore using attac	02852 HMENTS
Steven M. Kennedy Street Address			Street Addres	s		
Same as above . :	State	ZIp	City		State	Ζίρ
Director Name			Director Nan		•	••
Street Address			Street Addres	s		
City	State	Zip	City		State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	(*X* BOX FOR ATTACE	IMENT)	11. SHAF		BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of S	hares	Class/Serles	Par Value

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

100



8,000 \$.01 PAR VALUE

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.

GREY LEDGE HOLDINGS, INC.

By:

Standard of Officer

Steven M. Kennedy

Print or Type Name of Officer

President

Common

Title of Officer

\$.01 Par

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)
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1. Corporate ID No.

2. Name of Corporation

86948

Grey Ledge Holdings, Inc.

3. Street Address Principal Business Office City 02852 21 Circuit Drive, Quonset Point North Kingstown 4. Business Phone No. 6. SIC Code 5. State of Incorporation 5710 401 295-7800 RHODE ISLAND

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

To own and lease real estate

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

Steven M. Kennedy

Street Address

21 Circuit Drive, Quonset Point

City State

North Kingstown

: 02852

Secretary Name

Steven M. McInnis

Steven M. Kennedy Street Address

Street Address

38 Bellevue Ave.

Same as above

City State

02840 RI Newport

State

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

Director Name

Steven M. Kennedy

Street Address

Street Address

Same as above

City

Par Value

Director Name Director Name

Street Address Street Address

City State City State ZIP

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

AUTHORIZED SHARES

FOR SECRETARY OF STATE USE ONLY

Number of Shares Class/Series

ISSUED SHARES

Street Address

City

City

Director Name

Number of Shares

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

Class/Series Par Value

8,000 SHS \$.01 PAR VALUE

100

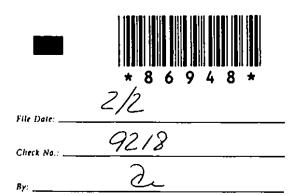
Common

State

\$.01 Par

Zio

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. HOLDINGS, Steven M. Kennedy Print or Type Name of Officer

President

(FORM MUST BE TYPED IN BLACK)

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

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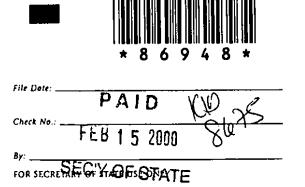
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rkurii	CORPORATIO	IA	ANNUAL REPORT	LOK	IIIL	ILAN	2000
filing Period	: January 1-March 1	•	Filing Fee: \$50.00				2000
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I. Corporate ID No.	2. Name of Corporation	-			
86948 - 3. Street Address Principal Business O	Grey Ledge I	Holdings, Inc.	City	State	Zip
21 Circuit Drive 6. Business Phone No.	Quonset Point	5. State of Incorporation	North Kingstown	RI	02852 6. SIC Code
401 295-7800 7. Brief Description of the Character of Own and lease rea	f Business Conducted in Rh 1 estate	ode ISLAND			5710
8. NAMES AND ADDRESS President Name Steven M. Kennedy		RS (*x* box for attach	MENT) FILL IN SPACES BEFO Vice President Name	DRE USING ATTACHME	INTS
Street Address 21 Circuit Drive			Street Address		
_{City} North Kingstown	State RI	^{Z(p} 02852	City	State	ZIP
Secretary Name Steven M. McInnis	• •		Treasurer Name Steven M. Kennedy		
Street Address 38 Bellevue Ave.		•	Street Address Same as above		
cny Newport	State RI	^{Zip} 02840	City	State	Zip
9. NAMES AND ADDRESS Director Name Steven M. Kennedy		CORS (*X* BOX FOR ATTA	CHMENT) FILL IN SPACES B	EFORE USING ATTACH	MENTS
Street Address Same as above			Street Address		
City	State	Żip	City	State	Zip
Director Name		•	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZEI) (*X* BOX FOR ATTACI	HMENT)	11. SHARES ISSUED ("X" I	BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 SHS \$.01 P.	AR VALUE		100	Common	\$.01 Par

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

Title of Officer



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements conteined herein are true and correct.

GREY LEDGE HOLDINGS, INC.

By:

Steven M. Kennedy

Print or Type Name of Officer

President

2. Name of Corporation

Grey Ledge Holdings, Inc.

(FORM MUST BE TYPED IN BLACK)

86948

3. Street Address Principal Business Office

21 Circuit Drive Quonset Point

1. Corporate ID No.

Elle Date:

Check No.:

FOR SECRETARY OF STATE USE ONLY

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

S. State of Incorporation

Ζiρ

02852

6. SIC Code

State

RI

this report, including any accompanying schedules and statements, and

that all statements contained herein are true and correct. HOLDTRES, INC. Pil

4. Business Phone No. 401 295~7800		S. State of Incorporation			6. SIC Code 5710	ļ
7. Brief Description of the Character of	Business Conducted Ir				•	-
Own and lease real 8. NAMES AND ADDRESSE President Name	estate S OF THE OFFI	CERS ("X" BOX FOR ATT	ACHMENT) : FILL IN SPACE Vice President Name	S BEFORE USING ATTAC	HMENTS.	
Steven M. Kennedy Street Address			Street Address			-
21 Circuit Drive,	Quonset Poi	int Zip	· City	- State	Žíų	
North Kingstown Secretary Name	RI	02852	Treasurer Name	****** - ***. * ** * ***** ***		
Steven M. McInnis Street Address			Steven M. Keni Street Address	nedy	. <u> </u>	
38 Bellevue Avenue	2 State	Ζίρ	Same as above	State	Zip -	
Newport 9. NAMES AND ADDRESSE Director Name	RI ES OF THE DIRI	02840 ECTORS (*x* BOX FOR A	ATTACHMENT) FILL IN SPA	CES BEFORE USING ATTA	ACHMENTS _	
Steven M. Kennedy Street Address			Street Address		-	-
Same as above	State	Zip	City	State	Zip	·
Director Name	• • •		Director Name	••••••		
Street Address			Street Address		•	
City	State	Zip	City	State	Zip	1
10. SHARES AUTHORIZED AUTHORIZED SHARES	(*X* BOX FOR ATT	TACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMEN	ת) (
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	-
8,000 SHS \$.01 PAR	VALUE		100	Common	\$.01	1
This report must be signe	 d in ink by eit	her the President, V	ice President, Secretary, A	ssistant Secretary, Treas	surer, Receiver	or Trustee
* S	6 9 4	8 *	Under penalty of	perjury, I declare and affir	m that I have ex	amined

GREY

Title of Officer

Steven M. Kennedy Print or Type Name of Officer President

City

North Kingstown

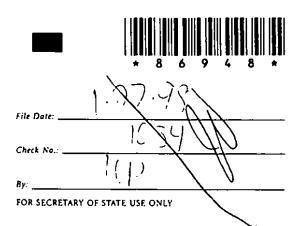


James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

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

(K)				
Office		City	State	Zip
Quonset Po	Int	North Kingstown	RI	02852
				6. SIC Code 5710
	Rhode Island			
	CPRC (suppose services as			
ES OF THE OFFI	CERS ("X" BOX FOR A	•		
,		ATEL ALGUMENT MANNE		
•	•	Street Address		
Ouonset Poi	nt	511111 11111111111111111111111111111111		
State		City	State	Zip
RI	02852	,		•
		Treasurer Name		•
5		Steven M. Kenned	dy	
		Street Address		
ne		Same as above		•
State	Zip	City	State	Zip
RI	02840			
ES OF THE DIRE	CTORS ("X" BOX FOR	ATTACHMENT)		
		Director Name		
y				
		Street Address		
State	Zip	City	State	Zip
		Director Name	••	•
		Street Address		
State	Zip	City	State	Zip
O ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (*x	* BOX FOR ATTACHMENT	r)
		ESSUED SHARES		
Class/Series	Par Volue	Number of Shares	Class/Series	Par Value
VALUE		100	Common	\$.01 Par
	2. Name of Corporat Grey Ledge Office Quonset Pos of Business Conducted in al estate ES OF THE OFFI Quonset Poin State RI State RI ES OF THE DIRE Y State State C'x" BOX FOR ATT Class/Series	2. Name of Corporation Grey Ledge Holdings, Inc. Office Quonset Point S. State of Incorpora RHODE ISI Of Business Conducted in Rhode Island all estate ES OF THE OFFICERS (*X* BOX FOR A') Quonset Point State Zip RI 02852 S. LIE State Zip RI 02840 ES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) Class/Series Par Value	2. Name of Corporation Grey Ledge Holdings, Inc. Office Quanset Point S. State of Incorporation RHODE ISLAND of Business Conducted in Rhode Island 11 estate ES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) Vice President Name Street Address Quanset Point State Zip RI 02852 Theosurer Name Steven M. Kenned Street Address Same as above State State Zip City RI 02840 ES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Street Address Street Address	2. Name of Corporation Grey Ledge Holdings, Inc. (Iffice City State Quonset Point North Kingstown RI 5. State of Incorporation RHODE ISLAND of Business Conducted in Rhode Island 11 estate ES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) Vice President Name Street Address Quonset Point State Zip City State O'CK* BOX FOR ATTACHMENT) Director Name Street Address State Zip City State O'CK* BOX FOR ATTACHMENT) Director Name Street Address State Zip City State O'CK* BOX FOR ATTACHMENT) 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) Class/Series Par Value Number of Shares Class/Series

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 Steven M. Kennedy

Print or Type Name of Officer

President Title of Officer



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

401-277-3040

ROFIT CORPORATION ANNUAL REPORT 1997

Hing	Period:	January	1-March 1	•	Filing	Fee:	\$50.00
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FORM	MUST	8 <i>E</i>	TYPED	IN	BLACK

1. Corporate ID No.

2. Name of Corporation

86948

Grey Ledge Holdings, Inc.

3. Street Address Principal Business Office 21 Circuit Drive, Quonset Point

North Kingstown

State

Zip

4. Business Phone No.

5. State of Incorporation

RI

02852 6. SIC Code

401 295-7800

RHODE ISLAND

5710

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

Own and lease real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*x* BOX FOR ATTACHMENT)

President Name

Vice President Name

Steven M. Kennedy

Street Address

Street Address

City

City

21 Circuit Drive, Quonset Point

Secretary Name

Street Address

Zip State

North Kingstown

State RI

02852

Treasurer Name

Steven M. McInnis

Steven M. Kennedy

Street Address

38 Bellevue Avenue

21 Circuit Drive, Quonset Point State

7,ip

City Newport State RI

02840

North Kingstown

02852

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

Director Name

Director Name

Steven M. Kennedy

Street Address

Street Address

21 Circuit Drive, Quonset Point

City

State

Zip

North Kingstown Director Name

02852

Zip

Director Name

Street Address

Street Address

City

State

City

State

Zip

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

AUTHORIZED SHARES Number of Shares

Par Value Class/Series

ISSUED SHARES

Class/Series

Par Value

8.000 SHS \$.01 PAR VALUE

100

Number of Shares

Common

\$.01 Par

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



Check No

FOR SECRETARY OF STATE USE ONLY

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. LEDGE HOLDTNGS,

Kennedy

<u>Steven M.</u> Print or Type Name of Officer President



PROFIT CORPORATION ANNUAL REPORT

1996



State of Knode Island and Providence Plantations
James R. Langevin, Secretary of State
Compensions Division

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

Filing Period: January 1-March 1

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1. CORPORATE IO NO.	2. NAME OF CORPORATION		RINT IN BLACK INK.		
06040		Todas Holdins	7		
86948 3. STREET ADDRESS PRINCIPAL BUSINES		Ledge Holdings,	inc.	STATE	ZIP C00€
54 East School	Straat		Woonsocket	RI	02895
Susiness Prove no. Is state of incorporation			WOONSOCKEL		6 SC COOE
401 769-1533		1	RHODE ISLAND		5710
BRITE DESCRIPTION OF THE OMNACTER OF BUSINESS COMOUCTED IN BRODE ISLAND					
Own and lease		K ISLAID			
8. NAMES AND ADDR PRESIDENT NAME Steven M. Kennedy			ESSES OF THE OFFICERS VICE PRESIDENT HAME		
SZSPRODA TESPITE			STREET ADDRESS		
54 East School Street			6		
Woonsocket	STATE	2# 000£ 02895	ατν	STATE	ZIP COOE
SECRE TARY HAME			TREASURER NAME		
Steven M. McInnis			Steven M. Kennedy		
38 Bellevue Avenue			54 East School Street		
GTY STATE 12P CODE			GIY STATE ZP CODE		
Newport	RI	02840	Woonsocket	RI	02895
orector Name Steven M. Kenn	·	AMES AND ADDR	ESSES OF THE D	IRECTORS	
STREET ADDRESS			STREET ADDRESS		
54 East School					
Woonsocket	STATE	2000€ 02895	arv	STATE	27P C000E
DIRECTOR NAME	Į KI	02093	OURECTOR NAME		
			*		
STREET ADDRESS			STREET ADORESS		
σιγ	STATE	77P C00€	ary	STATE	ZIP C00€
					
	1 0	SHARES AUTHOR	IZED KHU 1990F	ISSUED SHARES	• • •
NUMBER OF SHAPES CLASS / SERTES PAR VALUE			INUMBER OF SHARES	CLASS / SERIES	PAR VALUE
8,000 SHS \$.01 PAR VALUE			100	Common	\$.01 Par Value
		•	:		1
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	T	his report must be SIG	INED IN INK by either	the_	
P	resident, Vice Presi	ident, Secretary, Assis	tant Secretary, Treasure	er, Receiver or Truste	e .

File Date: / 27/9.6

Check No: 09/357

By: 711.7/00

For Secretary of State Use Only

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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.

GREY LEDGE HOED NGS INC.

GREY LEDGE HOEDINGS INC.

By:
Signature of Officer

Steven M. Kennedy Print or Type Name of Officer

_President_____

Title of Officer

1/17/96 Date