



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 64253		2. Name of Corporation CATALYST INC.			
3. Street Address Principal Business Office 2346 POST ROAD			City WARWICK	State RI	Zip 02886
4. Business Phone No. 4017321886		5. State of Incorporation RHODE ISLAND			6. SIC Code 7716
7. Brief Description of the Character of Business Conducted in Rhode Island ADVERTISING					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Brian T. Odell			Vice President Name Same		
Street Address 2346 Post Road			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name Same			Treasurer Name Same		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Brian T Odell			Director Name		
Street Address 2346 Post Road			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800 NO PAR VALUE			90		No Par

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



6 4 2 5 3

64253 DBC 02/28/2005 11:57 PM

FILED

File Date **MAR 02 2005** 13979

Check No. _____

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 _____ Date **2-28-05**
Brian T Odell
Print or Type Name of Officer
President
Title of Officer



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 64253		2. Name of Corporation Catalyst, Inc.			
3. Street Address Principal Business Office 2346 Post Road		City Warwick	State RI	Zip 02886	
4. Business Phone No. 401-732-1886		5. State of Incorporation Rhode Island			6. SIC Code 7716
7. Brief Description of the Character of Business Conducted in Rhode Island Advertising Agency					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Brian Odell			Vice President Name Brian Odell		
Street Address 2346 Post Road			Street Address 2346 Post Road		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name Same as Above			Treasurer Name Same as Above		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Brian Odell			Director Name		
Street Address 2346 Post Road			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800			90		No Par

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



6 4 2 5 3

File Date	<u>3/25/04</u>
Check No.	<u>12842</u>
By	<u>Se</u>
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	<u>Brian Odell</u>	Date	<u>3-22-04</u>
Print or Type Name of Officer Brian Odell			
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 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

64253

2. Name of Corporation

CATALYST INC.

3. Street Address Principal Business Office

2346 Post Road

City

Warwick

State

RI

Zip

02886

4. Business Phone No.

401-732-1886

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7716

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

Marketing & Communications

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

President Name

Vice President Name

Brian Odell

Brian Odell

Street Address

Street Address

2346 Post Road

Same

City

City

State

State

Zip

Zip

Warwick RI 02886

Secretary Name

Treasurer Name

Brian Odell

Brian Odell

Street Address

Street Address

Same

Same

City

City

State

State

Zip

Zip

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

City

State

State

Zip

Zip

Director Name

Director Name

Street Address

Street Address

City

City

State

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

Par Value

Number of Shares

Class/Series

Par Value

800 NO PAR VALUE

90

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



* 6 4 2 5 3 *

File Date: 3-14-03

Check No.: 11368

By: 16D

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.

Brian T Odell 3-13-03
Signature of Officer Date

Brian T Odell
Print or Type Name of Officer

President
Title of Officer



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)



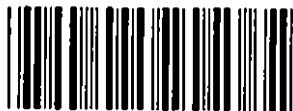
1. Corporate ID No. 64253	2. Name of Corporation CATALYST INC.		
3. Street Address Principal Business Office 2346 2348 Post Road		City Warwick	State RI
4. Business Phone No. 732-1886		5. State of Incorporation RHODE ISLAND	6. SIC Code 7716
7. Brief Description of the Character of Business Conducted in Rhode Island			

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Brian Odell			Vice President Name Brian Odell		
Street Address 2346 2348 Post Road			Street Address Same		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name Brian Odell			Treasurer Name Brian Odell		
Street Address Same			Street Address Same		
City	State	Zip	City	State	Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800 NO PAR VALUE			90		

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



* 6 4 2 5 3 *

File Date: 2. 22 02
Check No.: 95416
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: 2/20/02
Print or Type Name of Officer: **Brian Odell**
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)



1. Corporate ID No. 64253		2. Name of Corporation CATALYST INC.	
3. Street Address Principal Business Office 2348 Post Road		City Warwick	State RI
4. Business Phone No. 732-1886		6. SIC Code 7716	
5. State of Incorporation RHODE ISLAND			
7. Brief Description of the Character of Business Conducted in Rhode Island advertising			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Brian Odell		Vice President Name Brian Odell	
Street Address 2348 Post Road		Street Address Same	
City Warwick	State RI	City Warwick	State RI
Secretary Name Brian Odell		Treasurer Name Brian Odell	
Street Address Same		Street Address Same	
City Warwick	State RI	City Warwick	State RI
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
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
800 SHS NO PAR VAL		90	no par

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



* 6 4 2 5 3 *

File Date: **2/9/01**

Check No.: **8115**

By: **Xub**

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: **2/5/01**

Brian Odell

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



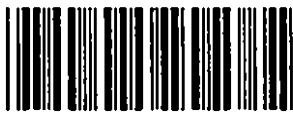
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 64253		2. Name of Corporation CATALYST INC.	
3. Street Address Principal Business Office 2346 Post Road		City Warwick	State RI
4. Business Phone No. 732-1886		5. State of Incorporation RHODE ISLAND	
		Zip 02886	6. SIC Code 7716
7. Brief Description of the Character of Business Conducted in Rhode Island			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name John Koenig Brian Odell		Vice President Name Brian Odell	
Street Address 2346 Post Road		Street Address 2346 Post Road	
City Warwick	State RI	City Warwick	State RI
Zip 02886		Zip 02886	
Secretary Name John Koenig Brian Odell		Treasurer Name John Koenig Brian Odell	
Street Address Same		Street Address Same	
City	State	City	State
Zip		Zip	
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) <input checked="" type="checkbox"/>		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
800 SHS NO PAR VAL		90	
Par Value		Par Value	
		No par value	

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



* 6 4 2 5 3 *

File Date: 3/1/00
Check No.: 6251
By: ru
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: 2/25/00
John Koenig Brian Odell
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. 64253		2. Name of Corporation Catalyst Inc.			
3. Street Address Principal Business Office 2348 Post Road 2346 Post Road		City Warwick	State RI	Zip 02886	
4. Business Phone No. (401) 732-1886		5. State of Incorporation Rhode Island			6. SIC Code 7716
7. Brief Description of the Character of Business Conducted in Rhode Island ADVERTISING AGENCY - BUSINESS TO BUSINESS					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name John Koenig BRIAN ODELL			Vice President Name Brian Odell NONE		
Street Address 2348 Post Road 2346 Post Road			Street Address 2348 Post Road		
City Warwick, RI	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name John Koenig BRIAN ODELL			Treasurer Name John Koenig BRIAN ODELL		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800		No par value	NONE		

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

File Date: Mar 5, 99
Check No.: 4853
By: JO

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 2/22/99
Print or Type Name of Officer BRIANT. ODELL
Title of Officer PRESIDENT

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. 64253		2. Name of Corporation CATALYST INC.			
3. Street Address Principal Business Office 2348 Post Road 2346 Post Road			City Warwick	State RI	Zip 02886
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			6. SIC Code 7716
7. Brief Description of the Character of Business Conducted in Rhode Island MARKETING COMMUNICATIONS, CONSULTATION + PROGRAM DEVELOPMENT					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name John Koenig John Koenig			Vice President Name Brian Odell		
Street Address 2348 Post Road 2346 Post Road			Street Address 2348 Post Road 2346 Post Road		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name John Koenig KOENIG			Treasurer Name John Koenig KOENIG		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800 SHS NO PAR VAL			90	NONE	0

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



* 6 4 2 5 3 *

File Date: **3.17.98**
Check No.: **101**
By: **UP**

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: **John R. Koenig** Date: **2/27/98**
Print or Type Name of Officer: **John R. Koenig**
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
401-277-3040



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. 64253		2. Name of Corporation Catalyst, Inc.			
3. Street Address Principal Business Office 2346 Post Road		City Warwick	State RI	Zip 02886	
4. Business Phone No. 401-732-1886		5. State of Incorporation Rh. Island		6. SIC Code 7716	
7. Brief Description of the Character of Business Conducted in Rhode Island Marketing Communication Programs					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)					
President Name John R. Koenig		Vice President Name Brim Odell			
Street Address 23 Winsor Dr.		Street Address 7 Yellowstone Dr.			
City Burrington	State RI	Zip 02806	City North Kingston	State RI	Zip 02852
Secretary Name		Treasurer Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)					
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800	Common		100	Common	

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

File Date: 8/12/97

Check No.: 4058

By: JB #9

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

PROFIT CORPORATION
ANNUAL REPORT

1996



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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO.

2. NAME OF CORPORATION

0064253 Catalyst Inc.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE

2346 Post Road

CITY

Warwick

STATE

RI

ZIP CODE

02886

4. BUSINESS PHONE NO.

401-732-1886

5. STATE OF INCORPORATION

Rhode Island

6. SAC CODE

7716

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

Development of Marketing communications.

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME

VICE PRESIDENT NAME

John Kuenig

Brian Odell

STREET ADDRESS

STREET ADDRESS

23 Windsor Drive

7 Yellowstone Drive

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

Barrington RI

02806

North Kingstown RI

02852

SECRETARY NAME

TREASURER NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

NUMBER OF SHARES

AUTHORIZED SHARES
CLASS / SERIES

PAR VALUE

NUMBER OF SHARES

ISSUED SHARES
CLASS / SERIES

PAR VALUE

800

Common

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.

File Date:

5/23/96

Check No:

160868

By:

KID

For Secretary of State Use Only

Signature of Officer

Print or Type Name of Officer

Title of Officer

Date

FORM 31 12/95

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: 004253 Annual Report for the year: 1991

Name of Corporation: CATALYST INC.
Business entity organized under the laws of the State of: Rhode Island
For foreign entity, address and telephone number of principal office:

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

2346 Post Road
Warwick, RI 02886

Phone: (401) 732-1886

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>John Koenig</u>	<u>23 Winsor Dr., Barrington, RI</u>	<u>02806</u>	
VICE PRESIDENT <u>Brian Odell</u>	<u>7 Yellowstone Dr., N. Kingstown, RI</u>	<u>02852</u>	
SECRETARY			
TREASURER			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares Class / Series

800 Common

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares Class / Series

100 Common

Date May 10, 19 96

By: John R. Koenig
John R. Koenig
PRINT OR TYPE NAME OF OFFICER SIGNING
TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

PAID

May 23 9 05 AM 1996

MAY 23 1996
KID 1148168
SECY OF STATE

1001/1001

RECEIVED
John C. Dean
SECRETARY OF STATE
CORPORATIONS DIV.

401 421 6869

04/26/96 10:38

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

Corporate ID: 0064253 Annual Report for the year: 1994

Name of Corporation: CATALYST INC.

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office:

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

Developing marketing communications.

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

2346 Post Rd.
Warwick, RI 02886

Phone: (401) 732-1886

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>JOHN KOENIG</u>	<u>23 Winsor Dr. Barrington, RI</u>	<u>RI</u>	<u>02806</u>
VICE PRESIDENT <u>Brian Odell</u>	<u>7 Yellowstone Drive, North Kingston, RI</u>	<u>RI</u>	<u>02852</u>
SECRETARY			
TREASURER			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
<u>800</u>	<u>Common</u>	<u>100</u>	<u>Common</u>

Date May 10, 1996 By: John R. Koenig
 PRINT OR TYPE NAME OF OFFICER SIGNING
 TITLE OF OFFICER SIGNING President

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

PAID

96 MAY 23 9 05 AM '96
 RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV.

MAY 23 1996
 KID 160828
 SECY OF STATE

Filing Fee \$50.00

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

5987B
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0054253 Annual Report for the year 1993

FIRST: The name of the corporation is CATALYST INC.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is developing marketing communications

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island ~~23 Winsor Drive, Barrington, RI 02806~~
2348 Post Road, Warwick, RI 02886

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
JOHN KOENIG	President	23 Winsor Drive, Barrington, RI 02806
BRIAN ODELL	Vice President	7 Yellowstone Drive, North Kingstown, RI 02852
JEFFREY CAUDILL	Secretary	447 Fair Street, Warwick, RI 02888
ROBERT BENNETT	Treasurer	20 Brentonwood Drive, Barrington, RI 02806

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
800	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par

Dated Nov-16 19 93

CATALYST INC.

(Name of Corporation)

By

John R. Koenig
President

(Report must be signed by an officer)

Title

Filing Fee \$50.00

2902 JB

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 02901

Corporate ID.....0064253..... Annual Report for the year.....1992.....

FIRST: The name of the corporation is.....CATALYST INC.....

SECOND: It is incorporated under the laws of.....the State of Rhode Island.....

THIRD: Character of business, briefly stated, is.....developing and marketing communications.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....23 Winsor Drive, Barrington, RI 02806.....

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

JOHN KOENIG

President

23 Winsor Drive, Barrington, RI 02806

BRIAN ODELL

Vice President

7 Yellowstone Drive, North Kingstown, RI 02852

JEFFREY CAUDILL

Secretary

447 Fair Street, Warwick, RI 02888

ROBERT BENNETT

Treasurer

20 Brentonwood Drive, Barrington, RI 02806

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

800

Common

No Par

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

Common

No Par

Dated.....December 30..... 19 92.....

CATALYST INC.

(Name of Corporation)

By.....J. R. Kanny.....
Title.....President.....

(Report must be signed by an officer)