



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 OR PRINTED IN BLACK)

1. Corporate ID No 89153		2. Name of Corporation ATLANTIC GRILLE, INC.			
3. Street Address Principal Business Office 91 Aquidneck Ave			City MIDDLETOWN	State RI	Zip 02842
4. Business Phone No. 401 849 4440		5. State of Incorporation RHODE ISLAND			6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island A RESTAURANT AND THE SALE OF FOOD AND BEVERAGES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William F. Armstrong			Vice President Name Richard P. Armstrong		
Street Address 136 Seascope Ave			Street Address 4 White Terrace		
City MIDDLETOWN	State RI	Zip 02842	City MIDDLETOWN	State RI	Zip 02842
Secretary Name William F. Armstrong			Treasurer Name Richard P. Armstrong		
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 NONE			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
200 NO PAR VALUE		NO PAR	200	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	1/13/05
Check No.	7665
By:	DA
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
Richard P. Armstrong
Print or Type Name of Officer
VP
Title of Officer



Office of the Secretary of State
Matthew A. Brown, Secretary of State

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 OR PRINTED IN BLACK)

1. Corporate ID No. 89153		2. Name of Corporation ATLANTIC GRILLE, INC.			
3. Street Address Principal Business Office 91 ADDISONCK AVE			City MIDDLETOWN	State RI	Zip 02842
4. Business Phone No. 4018494440		5. State of Incorporation RHODE ISLAND			6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island A RESTAURANT AND THE SALE OF FOOD AND BEVERAGES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William F. ARMSTRONG			Vice President Name Richard P. ARMSTRONG		
Street Address 136 SEASCAPE AVE			Street Address 4 WHITE TERRACE		
City MIDDLETOWN	State RI	Zip 02842	City MIDDLETOWN	State RI	Zip 02842
Secretary Name William F. ARMSTRONG			Treasurer Name Richard P. ARMSTRONG		
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			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
200 NO PAR VALUE		NO PAR	200	COMMON	NO PAR

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



* 8 9 1 5 3 *

File Date 1-5-04
Check No. 6204
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

Richard P. ARMSTRONG
Print or Type Name of Officer

VP
Title of Officer

Date 1/1/04



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.

89153

2. Name of Corporation

ATLANTIC GRILLE, INC.

3. Street Address Principal Business Office

91 AQUIDNECIL AVENUE

City

MIDDLETOWN RI

State

Zip

02842

4. Business Phone No.

5. State of Incorporation

401 849 4440

RHODE ISLAND

6. SIC Code

3079

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

RESTAURANT

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

William F. Armstrong

Richard P. Armstrong

Street Address

Street Address

136 SEASCAPE AVE

4 WHITE TERRACE

City

State

Zip

City

State

Zip

MIDDLETOWN RI

02842

MIDDLETOWN RI

02842

Secretary Name

Treasurer Name

William F. Armstrong

Richard P. Armstrong

Street Address

Street Address

City

State

Zip

City

State

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

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)

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

200 NO PAR VALUE

NO PAR

200

COMMON

NO PAR

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



* 8 9 1 5 3 *

File Date: 1-13-03

Check No.: 5310

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] 1/10/03
Signature of Officer Date

Richard P. Armstrong
Print or Type Name of Officer

VP
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. 89153 2. Name of Corporation ATLANTIC GRILLE, INC.
3. Street Address Principal Business Office 91 LIQUID NECK AVE City MIDDLETOWN State RI Zip 02842
4. Business Phone No. 401 849 4440 5. State of Incorporation RHODE ISLAND 6. SIC Code 3079

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

RESTAURANT - BREAKFAST & LUNCH

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

President Name <u>William F. Armstrong</u> Street Address <u>36 SENSARRE AVE</u> City <u>MIDDLETOWN</u> State <u>RI</u> Zip <u>02842</u> Secretary Name <u>William F. Armstrong</u> Street Address <u>36 SENSARRE AVE</u> City <u>MIDDLETOWN</u> State <u>RI</u> Zip <u>02842</u>	Vice President Name <u>Richard P. Armstrong</u> Street Address <u>4 WHITE TERRACE</u> City <u>MIDDLETOWN</u> State <u>RI</u> Zip <u>02842</u> Treasurer Name <u>Richard P. Armstrong</u> Street Address <u>4 WHITE TERRACE</u> City <u>MIDDLETOWN</u> State <u>RI</u> Zip <u>02842</u>
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Street Address City State Zip	Director Name Street Address City State Zip
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>200 NO PAR VALUE</u>	<u>NO PAR</u>	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>200</u>	<u>COMMON</u>	<u>NO PAR</u>

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



* 8 9 1 5 3 *

File Date: 1-3-02

Check No.: 4335

By: 2

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.

Richard P. Armstrong 12/31/01
Signature of Officer Date

Richard P. Armstrong
Print or Type Name of Officer

VP
Title of Officer



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. 89153 2. Name of Corporation ATLANTIC GRILLE, INC.

3. Street Address Principal Business Office 91 Aquidneck Ave City MIDDLETOWN State RI Zip 02842
4. Business Phone No. 401 849 4440 5. State of Incorporation RHODE ISLAND 6. SIC 5879

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

BREAKFAST + LUNCH RESTAURANT / EAT IN + TAKE OUT

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

President Name <u>William F. ARMSTRONG</u>	Vice President Name <u>RICHARD P. ARMSTRONG</u>
Street Address <u>136 SEASCAPE AVE</u>	Street Address <u>4 WHITE TERRACE</u>
City <u>MIDDLETOWN</u> State <u>RI</u> Zip <u>02842</u>	City <u>MIDDLETOWN</u> State <u>RI</u> Zip <u>02842</u>
Secretary Name <u>William F. ARMSTRONG</u>	Treasurer Name <u>RICHARD P. ARMSTRONG</u>
Street Address	Street Address
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)

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

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

ISSUED SHARES
Number of Shares Class/Series Par Value
200 COMMON NO PAR

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



* 8 9 1 5 3 *

File Date: 1/12

Check No: 2838

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] 1/10/01
Signature of Officer Date

RICHARD P. ARMSTRONG
Print or Type Name of Officer

VP
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. 89153		2. Name of Corporation ATLANTIC GRILLE, INC.			
3. Street Address Principal Business Office 91 AQUIDNECK AVE			City MIDDLETOWN	State RI	Zip 02842
4. Business Phone No. (401) 849-4440		5. State of Incorporation RHODE ISLAND			6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island RESTAURANT - BREAKFAST + LUNCH					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WILLIAM F. ARMSTRONG			Vice President Name RICHARD P. ARMSTRONG		
Street Address 136 SEASCAPE AVE			Street Address 4 WHITE TERRACE		
City MIDDLETOWN	State RI	Zip 02842	City MIDDLETOWN	State RI	Zip 02842
Secretary Name WILLIAM F. ARMSTRONG			Treasurer Name RICHARD P. ARMSTRONG		
Street Address			Street Address		
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 NONE			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
200 SHS NO PAR		NO PAR	200	COMMON	NO PAR

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



* 8 9 1 5 3 *

File Date: **12-22-99**

Check No.: **1899**

By: **AMF**

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 **12/20/99**

Print or Type Name of Officer **RICHARD P. ARMSTRONG**

Title of Officer **VP**



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. 89153		2. Name of Corporation ATLANTIC GRILLE, INC.			
3. Street Address Principal Business Office 91 AQUIDNECK AVE		City MIDDLETOWN	State RI	Zip 02842	
4. Business Phone No. 401 849 4440		5. State of Incorporation RHODE ISLAND		6. SIC Code 3079	
7. Brief Description of the Character of Business Conducted in Rhode Island RESTAURANT - BREAKFAST + LUNCH					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WILLIAM F. ARMSTRONG		Vice President Name RICHARD P. ARMSTRONG			
Street Address 136 SEDGECRE AVE		Street Address 4 WHITE TERRACE			
City MIDDLETOWN	State RI	Zip 02842	City MIDDLETOWN	State RI	Zip 02842
Secretary Name WILLIAM F. ARMSTRONG		Treasurer Name RICHARD P. ARMSTRONG			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name "NONE"		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)			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
200 SHS NO PAR		NO PAR	200	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: **1-6-99**

Check No.: **1010**

By: **ICP**

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.

RICHARD P. ARMSTRONG
Signature of Officer Date **1/5/99**

RICHARD P. ARMSTRONG
Print or Type Name of Officer

VICE PRESIDENT
Title of Officer



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

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



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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **89153** 2. Name of Corporation **ATLANTIC GRILLE, INC.**

3. Street Address Principal Business Office **91 AQUIDNECK AVE** City **MIDDLETOWN** State **RI** Zip **02842**

4. Business Phone No. **(401) 849-4440** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3079**

7. Brief Description of the Character of Business Conducted in Rhode Island
RESTAURANT - BREAKFAST + LUNCH

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

President Name WILLIAM F. ARMSTRONG	Vice President Name RICHARD P. ARMSTRONG
Street Address HALSEY STREET	Street Address 4 WHITE TERRACE
City NEWPORT State RI Zip 02840	City MIDDLETOWN State RI Zip 02842
Secretary Name WILLIAM F. ARMSTRONG	Treasurer Name RICHARD P. ARMSTRONG
Street Address	Street Address
City State Zip	City State Zip

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

Director Name "NONE"	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)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
200 SHS NO PAR		NO PAR

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	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: **2.9.98**
Check No.: **5871**
By: **ICP**
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 **2/5/98**
Print or Type Name of Officer
RICHARD P. ARMSTRONG
Title of Officer
VICE 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. 89153		2. Name of Corporation ATLANTIC GRILLE, INC.			
3. Street Address Principal Business Office 91 Aquidneck Ave.		City Middletown	State RI	Zip 02842	
4. Business Phone No. (401) 849-4440		5. State of Incorporation RHODE ISLAND		6. SIC Code 3079	
7. Brief Description of the Character of Business Conducted in Rhode Island Restaurant - Breakfast & lunch					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name William F. Armstrong			Vice President Name Richard P. Armstrong		
Street Address 18 Arthrop Ave			Street Address 4 White Terrace		
City Newport	State RI	Zip 02840	City Middletown	State RI	Zip 02842
Secretary Name William F. Armstrong			Treasurer Name Richard P. Armstrong		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name "None"			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) <input checked="" type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 SHS NO PAR		No Par	200	Common	No Par

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



* 8 9 1 5 3 *

File Date: **7/24/97**

Check No.: **5301**

By: **GAD**

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.

Richard P. Armstrong 7/22/97
Signature of Officer Date

RICHARD P. ARMSTRONG
Print or Type Name of Officer

Vice President
Title of Officer