



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. 136958		2. Name of Corporation CAMPAC UNITED CORP.			
3. Street Address Principal Business Office 1844 East Main Road			City Portsmouth	State RI	Zip 02871
4. Business Phone No. 505-636-5551		5. State of Incorporation Rhode Island		6. SIC Code 5553	
7. Brief Description of the Character of Business Conducted in Rhode Island THE OPERATION OF INCOME PRODUCING REAL PROPERTY					
8. NAMES AND ADDRESSES OF THE OFFICERS (X BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
President Name Kenneth M. Pacheco			Vice President Name Steven M. Camara		
Street Address 463 Stafford Road			Street Address 1134 American Legion Highway		
City Fall River	State MA	Zip 02721	City Westport	State MA	Zip 02790
Secretary Name Sherry A. Pacheco			Treasurer Name Sherry A. Pacheco		
Street Address 463 Stafford Road			Street Address 463 Stafford Road		
City Fall River	State MA	Zip 02721	City Fall River	State MA	Zip 02721
9. NAMES AND ADDRESSES OF THE DIRECTORS (X BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
Director Name Kenneth M. Pacheco			Director Name Steven M. Camara		
Street Address 463 Stafford Road			Street Address 1134 American Legion Highway		
City Fall River	State RI	Zip 02871	City Westport	State MA	Zip 02790
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (X BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUES 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
4000	Comm No Par Value		400	Common	No Par Value

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



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FILED

File Date: APR 22 2005 0188

Check No. _____

By: UB

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.

X Kenneth M. Pacheco X 1/26/05

Signature of Officer: Kenneth M. Pacheco Date: 1/26/05

Print or Type Name of Officer: Kenneth M. Pacheco

Title of Officer: President