



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. 761 | | 2. Name of Corporation ALMOR CORPORATION | | | |
| 3. Street Address Principal Business Office 7 HEMINGWAY DRIVE | | | City RIVERSIDE | State RI | Zip 02915 |
| 4. Business Phone No 4014341274 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE RENTAL | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS. ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name ALFRED T. MORRIS, JR. | | | Vice President Name . | | |
| Street Address 945 WARREN AVENUE | | | Street Address . | | |
| City E. PROVIDENCE | State RI | Zip 02914 | City . | State . | Zip . |
| Secretary Name . | | | Treasurer Name ALFRED T. MORRIS, JR. | | |
| Street Address . | | | Street Address 945 WARREN AVENUE | | |
| City . | State . | Zip . | City E. PROVIDENCE | State RI | Zip 02914 |
| 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"/> | | | | | |
| AUTHORIZED SHARES | | | | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 400 | COMM NO PAR VALUE | | 200 | COMMON | NO PAR VALUE |
| 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| ISSUED SHARES | | | | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| | | | | | |

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



7 6 1

761 DBC 01/05/05 12:38:47 PM

File Date 1/19/05

Check No. 1176

By: JA

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 _____
ALFRED T. MORRIS, JR.
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 OR PRINTED IN BLACK)

| | | | | | |
|--|--------------------|--|---|----------------------------|---------------------|
| 1. Corporate ID No. 761 | | 2. Name of Corporation ALMOR CORPORATION | | | |
| 3. Street Address Principal Business Office 7 HEMINGWAY DRIVE | | | City RIVERSIDE | State RI | Zip 02915 |
| 4. Business Phone No. 401-434-1274 | | 5. State of Incorporation RHODE ISLAND | | 6. SIC Code 5538 | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE RENTAL | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name ALFRED T. MORRIS, JR. | | | Vice President Name | | |
| Street Address 945 WARREN AVENUE | | | Street Address | | |
| City E. PROVIDENCE | State RI | Zip 02914 | City | State | Zip |
| Secretary Name | | | Treasurer Name ALFRED T. MORRIS, JR. | | |
| Street Address | | | Street Address 945 WARREN AVENUE | | |
| City | State | Zip | City E. PROVIDENCE | State RI | Zip 02914 |
| 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 |
| 400 COMM NO PAR VALUE | | | 200 | COMMON | NO PAR VAL |

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



* 7 6 1 *

File Date 2/6/04
Check No. 1151
By: AS
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] 2/6/2004 *Date*
ALFRED T. MORRIS, JR.
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 2003

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

(FORM MUST BE TYPED IN BLACK)

| | | | | | |
|---|--|---|-------------------|-------------|---------------------|
| 1. Corporate ID No. *761* | | 2. Name of Corporation ALMOR CORPORATION | | | |
| 3. Street Address Principal Business Office 7 HEMINGWAY DR | | | City RIVERSIDE | State RI | Zip 02915 |
| 4. Business Phone No. 4014341274 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE RENTAL | | | | | |

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

| | | | | | |
|---|-------------|--------------|---|-------------|--------------|
| President Name Alfred T. Morris, Jr. | | | Vice President Name | | |
| Street Address 945 Warren Avenue | | | Street Address | | |
| City E. Providence | State RI | Zip 02914 | City | State | Zip |
| Secretary Name | | | Treasurer Name Alfred T. Morris, Jr. | | |
| Street Address | | | Street Address 945 Warren Avenue | | |
| City | State | Zip | City E. Providence | State RI | Zip 02914 |

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 |
| 400 | COMM NO PAR VALUE | | 200 | common | no par value |
| | | | | | |

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



761 DBC1/9/0312:28:33 PM

File Date 1-14-03

Check No. 1121

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] 1/13/2003

Signature of Officer Date

Alfred T. Morris, Jr.

Print or Type Name of Officer

President

Title of Officer



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. **761** 2. Name of Corporation **ALMOR CORPORATION**

3. Street Address Principal Business Office **7 Hemingway Drive** City **Riverside** State **RI** Zip **02915**
4. Business Phone No. **401-434-1274** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

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

Real Estate Rental

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

| | |
|--|--|
| President Name Alfred T. Morris, Jr. Street Address 945 Warren Avenue City E. Providence State RI Zip 02914 | Vice President Name Street Address City State Zip |
| Secretary Name Street Address City State Zip | Treasurer Name Alfred T. Morris, Jr. Street Address 945 Warren Avenue City E. Providence State RI Zip 02914 |

4. 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 |
| Director Name Street Address City State Zip | Director Name Street Address City State Zip |

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

| Number of Shares | Class/Series | Par Value |
|------------------|--------------------------|-----------|
| 400 | COMM NO PAR VALUE | |

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

| Number of Shares | Class/Series | Par Value |
|------------------|---------------|---------------------|
| 200 | COMMON | no par value |

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



* 7 6 1 *

File Date: 2-20-02
Check No.: 1108
By: KML

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 _____
Alfred T. Morris, Jr.
Print or Type Name of Officer
President



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. **761** 2. Name of Corporation **ALMOR CORPORATION**
3. Street Address Principal Business Office **7 HEMINGWAY DRIVE** City **RIVERSIDE** State **RI** Zip **02915**
4. Business Phone No. **401-434-1274** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**
7. Brief Description of the Character of Business Conducted in Rhode Island

REAL ESTATE RENTAL

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

President Name **ALFRED T. MORRIS, JR.** Vice President Name
Street Address **945 WARREN AVENUE** Street Address
City **E. PROVIDENCE** State **RI** Zip **02914** City State Zip
Secretary Name

Treasurer Name **ALFRED T. MORRIS, JR.**
Street Address **945 WARREN AVENUE**
City **E. PROVIDENCE** State **RI** Zip **02914**

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
Director Name
Street Address
City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
400 COMM NO PAR VALUE

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

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

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



* 7 6 1 *

2/21

File Date: 1088

Check No.: 2

By: _____

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.

Alfred T. Morris, Jr. / 2/20/2001
Signature of Officer Date

ALFRED T. MORRIS, JR.
Print or Type Name of Officer

PRESIDENT
Title of Officer



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. **761** 2. Name of Corporation **ALMOR CORPORATION**
 3. Street Address Principal Business Office **7 HEMINGWAY DRIVE** City **RIVERSIDE** State **RI** Zip **02915**
 4. Business Phone No. **401-434-1274** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**
 7. Brief Description of the Character of Business Conducted in Rhode Island

REAL ESTATE RENTAL

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

| | |
|--|---|
| President Name ALFRED T. MORRIS, JR. Street Address 945 WARREN AVENUE City E. PROVIDENCE State RI Zip 02914 | Vice President Name Street Address City _____ State _____ Zip _____ |
| Treasurer Name ALFRED T. MORRIS, JR. Street Address 945 WARREN AVENUE City E. PROVIDENCE State RI Zip 02914 | Secretary Name Street Address City _____ State _____ Zip _____ |

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 _____ |
| Director Name Street Address City _____ State _____ Zip _____ | Director Name Street Address City _____ State _____ Zip _____ |

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

| AUTHORIZED SHARES | Class/Series | Par Value |
|-----------------------|--------------|-----------|
| 400 COMM NO PAR VALUE | | |

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

| ISSUED SHARES | Class/Series | Par Value |
|-------------------------|--------------|-----------|
| 200 COMMON NO PAR VALUE | | |

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



* 7 6 1 *

File Date: 1/6/00

Check No.: 1072

By: AC

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: Alfred T. Morris, Jr. Date: 1/5/00

ALFRED T. MORRIS, JR.

PRESIDENT
Title of Officer

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. 761 | | 2. Name of Corporation ALMOR CORPORATION | | | |
| 3. Street Address Principal Business Office 7 HEMINGWAY DRIVE | | | City RIVERSIDE | State RI | Zip 02915 |
| 4. Business Phone No. (401) 434 - 1274 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE RENTAL | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name ALFRED T. MORRIS, JR. | | | Vice President Name | | |
| Street Address 945 WARREN AVENUE | | | Street Address | | |
| City E. PROVIDENCE | State RI | Zip 02914 | City | State | Zip |
| Secretary Name | | | Treasurer Name ALFRED T. MORRIS, JR. | | |
| Street Address | | | Street Address 945 WARREN AVENUE | | |
| City | State | Zip | City E. PROVIDENCE | State RI | Zip 02914 |
| 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 |
| 400 COMM NO PAR VALUE | | | 200 | COMMON | NO PAR VALUE |

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



File Date: 1/13/99
 Check No.: 1059
 By: GMN TC
 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: 1/11/99
ALFRED T. MORRIS, JR.
 Print or Type Name of Officer
PRESIDENT
 Title of Officer



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. 761 | | 2. Name of Corporation ALMOR CORPORATION | | |
| 3. Street Address Principal Business Office 7 HEMINGWAY DRIVE | | City RIVERSIDE | State RI | Zip 02915 |
| 4. Business Phone No. (401) 434 - 1274 | | 5. State of Incorporation RHODE ISLAND | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE RENTAL | | | | |

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

| | | | | | |
|--|--------------------|---------------------|--|--------------------|---------------------|
| President Name ALFRED T. MORRIS, JR. | | | Vice President Name | | |
| Street Address 945 WARREN AVENUE | | | Street Address | | |
| City E. PROVIDENCE | State RI | Zip 02914 | City | State | Zip |
| Secretary Name | | | Treasurer Name ALFRED T. MORRIS, JR. | | |
| Street Address | | | Street Address 945 WARREN AVENUE | | |
| City | State | Zip | City E. PROVIDENCE | State RI | Zip 02914 |

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 (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | | |
|-------------------|-------------------|-----------|
| Number of Shares | Class/Series | Par Value |
| 400 SHS | NO PAR COM | |

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

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

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



* 7 6 1 *

File Date: 3-7-98
1043
 Check No.: 100
 By: _____
 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.

Alfred T. Morris, Jr. 1/6/98
 Signature of Officer Date

ALFRED T. MORRIS, JR.

or Type Name of Officer

PRESIDENT

Title of Officer



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. 761 | | 2. Name of Corporation ALMOR CORPORATION | |
| 3. Street Address Principal Business Office 7 HEMINGWAY DRIVE | | City RIVERSIDE | State RI |
| 4. Business Phone No. (401) 434-1274 | | 5. State of Incorporation RHODE ISLAND | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE RENTAL | | 6. SIC Code 5538 | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) | | | |
| President Name ALFRED T. MORRIS, JR. | | Vice President Name | |
| Street Address 945 WARREN AVENUE | | Street Address | |
| City E. PROVIDENCE | State RI | City | State |
| Zip 02914 | | Zip | |
| Secretary Name | | Treasurer Name ALFRED T. MORRIS, JR. | |
| Street Address | | Street Address 945 WARREN AVENUE | |
| City | State | City E. PROVIDENCE | State RI |
| Zip | | Zip 02914 | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) | | | |
| 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 AND ISSUED (*X* BOX FOR ATTACHMENT) | | | |
| AUTHORIZED SHARES | | ISSUED SHARES | |
| Number of Shares | Class/Series | Number of Shares | Class/Series |
| 400 SHS NO PAR COM | | 200 | COMMON |
| | | | NO PAR VALUE |

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



* 7 6 1 *

File Date: 1-30-97

Check No.: 1028

By: IUP/SEC

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.

Alfred T. Morris, Jr. 1/14/97
Signature of Officer Date

ALFRED T. MORRIS, JR.
Print or Type Name of Officer

PRESIDENT
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. 761 | | 2. NAME OF CORPORATION ALMOR CORPORATION | | | | | |
| 3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 7 Hemingway Drive | | | | CITY Riverside | STATE RI | ZIP CODE 02915 | |
| 4. BUSINESS PHONE NO. 434-1274 | | | 5. STATE OF INCORPORATION RHODE ISLAND | | | 6. SIC CODE 5538 | |
| 7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Real Estate Rental | | | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS | | | | | | | |
| PRESIDENT NAME Alfred T. Morris, Jr. | | | | VICE PRESIDENT NAME | | | |
| STREET ADDRESS 945 Warren Avenue | | | | STREET ADDRESS | | | |
| CITY East Providence | STATE RI | ZIP CODE 02914 | | CITY | STATE | ZIP CODE | |
| SECRETARY NAME | | | | TREASURER NAME Alfred T. Morris, Jr. | | | |
| STREET ADDRESS | | | | STREET ADDRESS 945 Warren Avenue | | | |
| CITY | STATE | ZIP CODE | | CITY E. Providence | STATE RI | ZIP CODE 02914 | |
| 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 | | | | | | | |
| AUTHORIZED SHARES | | | ISSUED SHARES | | | | |
| NUMBER OF SHARES | CLASS / SERIES | PAR VALUE | NUMBER OF SHARES | CLASS / SERIES | PAR VALUE | | |
| 400 SHS | NO PAR COM | | 200 | Common | No Par Value | | |
| | | | | | | | |
| | | | | | | | |

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: 1/22/96

Check No: 1017

By: /cp
For Secretary of State Use Only

Signature of Officer

Alfred T. Morris, Jr.
Print or Type Name of Officer

President
Title of Officer

1/22/96
Date

State of Rhode Island and Providence Plantations
 Office of the Secretary of State
 100 North Main Street
 Providence, Rhode Island 02902-1335
 401-277-3040

CR. 1150 (CS)

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: 0000761 Annual Report for the Year: 1995

Name of Corporation: Almor Corporation

Business entity organized under the laws of the State of RI
 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)

Phone: () _____

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

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

Real Estate Rental

7 Hemingway Drive
Riverside, RI 02915

Phone (401) 434-1274

THE NAMES OF THE OFFICERS ARE:

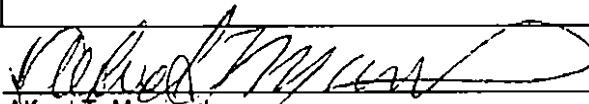
| PRESIDENT | STREET ADDRESS | CITY/STATE | ZIP CODE |
|-----------------------|-------------------|---------------------|----------|
| Alfred T. Morris, Jr. | 945 Warren Avenue | East Providence, RI | 02914 |
| VICE PRESIDENT | STREET ADDRESS | CITY/STATE | ZIP CODE |
| | | | |
| SECRETARY | STREET ADDRESS | CITY/STATE | ZIP CODE |
| | | | |
| TREASURER | STREET ADDRESS | CITY/STATE | ZIP CODE |
| Alfred T. Morris, Jr. | 945 Warren Avenue | East Providence, RI | 02914 |

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 |
| 400 | Common, No Par Value | 200 | Common, No Par Value |

Date January 4, 19 95

By: 
Alfred T. Morris, Jr.
 PRINT OR TYPE NAME OF OFFICER SIGNING
President
 TITLE OF OFFICER SIGNING

Form 31 1995

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.

Filing Fee \$50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT
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

File Annually
LLC Sept 1 - Nov 1
CORP: Jan 1 - March 1

Corporate ID: 0000761 Annual Report for the year: 1994

Name of Business Entity: ALMOR CORPORATION

Business entity organized under the laws of the State of R.I.

Federal Taxpayer Identification Number [REDACTED]

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

Phone ()

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

7 Hemingway Drive
Riverside, RI 02915

Phone (401) 434 - 1274

Business Entity is (check one)

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed

Alfred T. Morris, Jr.
945 Warren Avenue
East Providence, RI 02911

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

Real Estate Rental

Date of Organization: 9/18/63

Date of Qualification to do business in Rhode Island (if foreign entity).

THE NAMES OF THE OFFICERS ARE:

CHIEF FINANCIAL OFFICER OR PRESIDENT (Sole Officer) NAME: Alfred T. Morris, Jr. STREET ADDRESS: 945 Warren Avenue CITY/STATE: East Providence, RI ZIP CODE: 02911

CHIEF OPERATING OFFICER OR VICE PRESIDENT (Sole Officer) NAME: STREET ADDRESS: CITY/STATE: ZIP CODE:

CHIEF FINANCIAL OFFICER OR SECRETARY (Sole Officer) NAME: STREET ADDRESS: CITY/STATE: ZIP CODE:

CHIEF FINANCIAL OFFICER OR TREASURER (Sole Officer) NAME: Alfred T. Morris, Jr. STREET ADDRESS: 945 Warren Avenue CITY/STATE: East Providence, RI ZIP CODE: 02911

THE NAMES OF THE DIRECTORS ARE:

NAME: STREET ADDRESS: CITY/STATE: ZIP CODE:

NAME: STREET ADDRESS: CITY/STATE: ZIP CODE:

NAME: STREET ADDRESS: CITY/STATE: ZIP CODE:

NUMBER OF SHARES AUTHORIZED (if Applicable) NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)

NUMBER 100 NUMBER 200

CLASS Common CLASS Common

SERIES SERIES

PAR VALUE OR WITHOUT PAR No Par Value PAR VALUE OR WITHOUT PAR No Par Value

Date February 24 19 94 By: Alfred Morris, Jr.

Alfred T. Morris, Jr.

President

TITLE OF OFFER SIGNING

Form 31 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC-3 must be filed.

CONSTANCE A. HOWES/TC&G
ONE OLD STONE SQUARE, 7TH FLOOR
PROVIDENCE RI 02903

FILED
FEB 28 1994
By 113196

Filing Fee \$50.00

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 02903

Corporate ID 0000761 Annual Report for the year 1993

FIRST: The name of the corporation is

Almor Corporation

SECOND: It is incorporated under the laws of

Rhode Island

THIRD: Character of business, briefly stated, is

Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

Name Office Address (including number, street, zip code)

Director

Director

Director

Alfred T. Morris, Jr. President 945 Warren Ave; East Prov., RI 02914

Vice President

Secretary

Alfred T. Morris, Jr. Treasurer Same

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|------------|--|
| <u>400</u> | <u>Common</u> | <u>100</u> | <u>No Par Value</u> |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| <u>200</u> | <u>Common</u> | | <u>No Par Value</u> |

MAR 02 1993
SECY OF STATE

Check # 1123
900

Dated January 7, 19 93

Almor Corporation

(Name of Corporation)

By

Title

Alfred T. Morris, Jr.
President

(Report must be signed by an officer)

Filing Fee \$50.00

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 02903

Corporate ID **0000761** Annual Report for the year **1992**

FIRST: The name of the corporation is **Almor Corporation**

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

THIRD: Character of business, briefly stated, is

Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island **Tillinghast, Collins & Graham**
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

| Name | Office | Address (including number, street, zip code) |
|------------------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris, Jr. | President | 945 Warren Ave; East Prov., RI 02914 |
| | Vice President | |
| | Secretary | |
| Alfred T. Morris, Jr. | Treasurer | Same |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| 400 | Common | | No Par Value |

551067

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| 200 | Common | | No Par Value |

Dated **January 4, 19 92**

Almor Corporation

(Name of Corporation)

By

Title

Alfred T. Morris, Jr.
President

(Report must be signed by an officer)

Filing Fee \$50.00

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 02903

Corporate ID 0000761 Annual Report for the year 1991

FIRST: The name of the corporation is ALMOR CORPORATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

| Name | Office | Address (including number, street, zip code) |
|------------------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| <u>Alfred T. Morris, Jr.</u> | President | <u>945 Warren Ave; East Prov., RI 02914</u> |
| | Vice President | |
| | Secretary | |
| <u>Alfred T. Morris, Jr.</u> | Treasurer | <u>Same</u> |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|-------------|--|
| <u>400</u> | <u>Common</u> | <u>PAID</u> | <u>No Par Value</u> |

FEB 8 1991

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| <u>200</u> | <u>Common</u> | | <u>No Par Value</u> |

SECY OF STATE

Dated January 18, 19 91

Almor Corporation

(Name of Corporation)

By Alfred Morris, Jr.

Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

02

Corporate ID 761 Annual Report for the year 1990

FIRST: The name of the corporation is

Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

Name Office Address (including number, street, zip code)

..... Director

..... Director

..... Director

Alfred T. Morris, Jr. President 945 Warren Ave; East Prov., RI 02914

..... Vice President

..... Secretary

Alfred T. Morris, Jr. Treasurer Same

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| 400 | Common | | No Par Value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| 200 | Common | | No Par Value |

PAID Par Value or statement that shares are without par value
JAN 29 1990
REG'Y OF STATE

Dated January 25, 19 90

Almor Corporation
(Name of Corporation)

By *Alfred Morris*

Title

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

D.P.

Corporate ID 761 Annual Report for the year 1989

FIRST: The name of the corporation is

Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

Name Office Address (including number, street, zip code)

..... Director

..... Director

..... Director

etc
Alfred T. Morris, Jr. President 945 Warren Ave; East Prov., RI 02914

..... Vice President

..... Secretary

Alfred T. Morris, Jr. Treasurer Same

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|-------------|--|
| 400 | Common | PAID | No Par Value |

JAN 25 1989

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | Common | | No Par Value |

SEC'Y OF STATE

Dated January 12, 19 89

Almor Corporation
(Name of Corporation)

By *Alfred Morris Jr*

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 761 Annual Report for the year 1988

FIRST: The name of the corporation is ALMOR CORPORATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

FOURTH: If foreign corporation, address of its principal office

Real Estate Rental

FIFTH: Business address in Rhode Island Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

| Name | Office | Address (including number, street, zip code) |
|-----------------------|----------------|--|
| ..... | Director | ..... |
| ..... | Director | ..... |
| ..... | Director | ..... |
| Alfred T. Morris, Jr. | President | 945 Warren Avenue, East Prov., RI 02914 |
| ..... | Vice President | ..... |
| ..... | Secretary | ..... |
| Alfred T. Morris, Jr. | Treasurer | Same |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class |
|---------------|--------|
| 400 | Common |

EIGHTH: Number of Shares issued:

| No. of Shares | Class |
|---------------|--------|
| 200 | Common |

ENTERED JUL 27 1988
PAID
FEB 12 1988
SECY. OF STATE
Series

Par Value or statement that shares are without par value
No Par Value

Par Value or statement that shares are without par value
No Par Value

Dated January 28, 19 88

(Report must be signed by an officer)

Almor Corporation
(Name of Corporation)
By [Signature]
Title President

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 761 Annual Report for the year 1987

FIRST: The name of the corporation is ALMOR CORPORATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

FOURTH: If foreign corporation, address of its principal office

Real Estate Rental

FIFTH: Business address in Rhode Island Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

| Name | Office | Address (including number, street, zip code) |
|------------------------------|-----------------------|--|
| | Director | |
| | Director | |
| | Director | |
| <u>Alfred T. Morris, Jr.</u> | <u>President</u> | <u>945 Warren Avenue, East Prov., RI 02914</u> |
| | <u>Vice President</u> | |
| | <u>Secretary</u> | |
| <u>Alfred T. Morris, Jr.</u> | <u>Treasurer</u> | <u>Same</u> |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| <u>400</u> | <u>Common</u> | | <u>No Par Value</u> |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|---------------|--------|--|
| <u>200</u> | <u>Common</u> | | <u>No Par Value</u> |

PAID
FEB 16 1987
SECY. OF STATE

MAY 05 1987

BMC

Dated February 10, 19 87

Almor Corporation
(Name of Corporation)
By *Alfred T. Morris, Jr.*
Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 761 Annual Report for the year 1986

FIRST: The name of the corporation is Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

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

| Name | Office | Address (including number, street, zip code) |
|------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay Street, Rumford, RI 02916 |
| | Vice President | |
| | Secretary | |
| Alfred T. Morris | Treasurer | Same |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 400 | Common | | No Par Value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | Common | | No Par Value |

Dated January 14, 1986

[Signature] FEB 8

Almor Corporation
(Name of Corporation)

By [Signature]
Title President

(Report must be signed by an officer)

01/22/86 PAID 00000001

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

761



Annual Report for the year 1985

FIRST: The name of the corporation is

Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

Tillinghast, Collins & Graham
One Old Stone Square, Providence, RI 02903
ATTN: Alfred B. Stapleton, Esq.

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

| Name | Office | Address |
|------------------|----------------|----------------------------------|
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay Street, Rumford, RI 02916 |
| | Vice President | |
| | Secretary | |
| Alfred T. Morris | Treasurer | Same |

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 400 | Common | | No Par Value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | Common | | No Par Value |

Dated: January 11, 1985

Almor Corporation

(Name of Corporation)

By *Alfred S. Morris Sr.*

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

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CHES
APR 22 1985

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is

Almor Corporation

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

THIRD: Character of business, briefly stated, is Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 2000 Hospital Trust Tower, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

| Name | Office | Address |
|------------------|----------------|------------------------------------|
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay Street, Rumford, R.I. 02916 |
| Joseph Souza | Vice President | 223 Hot & Cold Lane, Somerset, MA |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay Street, Rumford, R.I. 02916 |

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 400 | Common | | No Par Value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | Common | | No Par Value |

Dated:

1/5

19 84

3
7
84

Almor Corporation

(Name of Corporation)

1300
SECRET
FILE

By: Alfred J. Morris Jr.
Pres.

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1983

FIRST: The name of the corporation is
Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is
Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 89 Valley Street, East Providence, RI 02914

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

| Name | Office | Address |
|------------------|----------------|-----------------------------------|
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay St; Rumford, RI 02916 |
| Joseph Souza | Vice President | 223 Hot & Cold Lane, Somerset, MA |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay St; Rumford, RI 02916 |

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 400 | Common | | No Par Value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | Common | | No Par Value |

Dated: January 3, 19 83 Almor Corporation
(Name of Corporation)

By *Alfred J. Morris Sr.*
Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is
Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is
Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) 89 Valley Street, East Providence, RI 02914

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

| Name | Office | Address |
|------------------|----------------|-----------------------------------|
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay St; Rumford, RI 02916 |
| Joseph Souza | Vice President | 223 Hot & Cold Lane, Somerset, MA |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay St; Rumford, RI 02916 |

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|---|
| 400 | Common | | No Par Value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|---|
| 200 | Common | | No Par Value |

Dated: January 12, 19 82

Almor Corporation
(Name of Corporation)

By Alfred T. Morris

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

1-14-82
3461A
150081

JAN 15 1982
rec

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

**ANNUAL REPORT
OF**

Almor Corporation

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is
Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
89 Valley Street, East Providence, RI 02914

and the name of its registered agent in Rhode Island at such address is
Ernest Agresti, Edwards & Angell, 1 Hospital Trust Plaza, Prov., RI 02903

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is
Real Estate Rental

SIXTH: The names and respective addresses of its directors and officers are:

| Name | Office | Address |
|------------------|----------------|-----------------------------------|
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay St; Rumford, RI 02916 |
| Joseph Souza | Vice President | 223 Hot & Cold Lane, Somerset, MA |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay St; Rumford, RI 02916 |

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| Number of Shares | Class | Series | Par Value per Share or Statement that Shares are without Par Value |
|------------------|--------|--------|--|
| 400 | Common | 1 | No Par Value |

5270A14...150081

JAN 26 1981
[Signature]

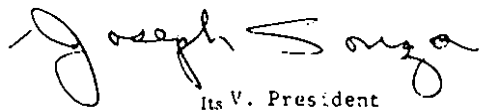
EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| <u>Number of Shares</u> | <u>Class</u> | <u>Series</u> | <u>Par Value per Share or Statement that Shares are without Par Value</u> |
|-----------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated January 5, 1981

Almor Corporation
(NAME OF CORPORATION)

By


Its V. President

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Almor Corporation

Pursuant to the provisions of Section 7.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is

Almor Corporation

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

89 Valley Street, East Providence, RI 02914

and the name of its registered agent in Rhode Island at such address is

Ernest Agresti, Edwards & Angell, 1 Hospital Trust Plaza,
Providence, RI 02903

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is

Real Estate Rental

SIXTH: The names and respective addresses of its directors and officers are:

| Name | Office | Address |
|------------------|----------------|-----------------------------------|
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay St; Rumford, RI 02916 |
| Joseph Souza | Vice President | 223 Hot & Cold Lane, Somerset, MA |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay St; Rumford, RI 02916 |

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| Number of Shares | Class | Series | Par Value per Share or Statement that Shares are without Par Value |
|------------------|--------|--------|--|
| 400 | Common | 1 | No Par Value |

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| <u>Number of Shares</u> | <u>Class</u> | <u>Series</u> | <u>Par Value per Share or Statement that Shares are without Par Value</u> |
|-------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated January 16 , 1980.

Almor Corporation
(NAME OF CORPORATION)

By

Joseph Song
Its V. President

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT
OF

Almor Corporation

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| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay St; Rumford, RI 02916 |
| Joseph Souza | Vice President | 223 Hot & Cold Lane, Somerset, MA |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay St; Rumford, RI 02916 |

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| Number of Shares | Class | Series | Par Value per Share or Statement that Shares are without Par Value |
|------------------|--------|--------|--|
| 400 | Common | 79 | No Par Value |

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| <u>Number of Shares</u> | <u>Class</u> | <u>Series</u> | <u>Par Value per Share or Statement that Shares are without Par Value</u> |
|-----------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated January 12 , 1979

Almor Corporation
(NAME OF CORPORATION)

By

Joseph Souza Vice Pres.
1st President

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Almor Corporation

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Real Estate Rental

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| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay Street, Rumford, R.I. 02916 |
| Joseph Souza | Vice President | 223 Hot & Cold Lane, Somersct, Mass. |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay Street, Rumford, R.I. 02916 |

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| Number of Shares | Class | Series | Par Value per Share or Statement that Shares are without Par Value |
|------------------|--------|--------|--|
| 400 | Common | | No Par Value |

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| Number of Shares | Class | Series | Par Value per Share or Statement that Shares are without Par Value |
|---------------------|--------|--------|---|
| 200 | Common | | No Par Value |

Dated January 19, , 1978

Almor Corporation
(NAME OF CORPORATION)

By

Joseph Souza
Its Pres/Treas

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT
OF

Almor Corporation

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

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Rhode Island

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| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay Street, Rumford, R.I. 02916 |
| | Vice President | |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay Street, Rumford, R.I. 02916 |

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|------------------|--------|--------|--|
| 400 | Common | | No Par Value |

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

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|-----------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated January 18 , 1977

Almor Corporation
(NAME OF CORPORATION)

By *Alfred J. Morris, Sr.*
Its Pres/Treas

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Almor Corporation

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| | Director | |
| | Director | |
| | Director | |
| | Director | |
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| | Vice President | |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay Street, Rumford, R.I. 02916 |

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|------------------|--------|--------|--|
| 400 | Common | | No Par Value |

MAR 20 1976

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| <u>Number of Shares</u> | <u>Class</u> | <u>Series</u> | <u>Par Value per Share or Statement that Shares are without Par Value</u> |
|-------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated January 9, , 1976

Almor Corporation
(NAME OF CORPORATION)

By *Alfred J. Morris Sr.*
Its Pres/Treas

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Almor Corporation

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| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Alfred T. Morris | President | 30 Jay Street, Rumford, R.I. 02916 |
| | Vice President | |
| | Secretary | |
| Alfred T. Morris | Treasurer | 30 Jay Street, Rumford, R.I. 02916 |

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|------------------|--------|--------|--|
| 400 | Common | | No Par Value |

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|-------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated January 13, 1975

Almor Corporation
(NAME OF CORPORATION)

By *Alfred J. Morris Sr.*
Its Pres/Treas

FR-6-75 SEC. OF STATE 113 43***15.00

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

**ANNUAL REPORT
OF**

Almor Corporation

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| | Director | |
| | Director | |
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|------------------|--------|--------|--|
| 400 | Common | | No Par Value |

JAN 16 1974
[Signature]

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|-------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated February . . . , 19 74

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Almor Corporation
(NAME OF CORPORATION)

By Walter J. Morris
Its Pres/Treas

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

**ANNUAL REPORT
OF**

Almor Corporation

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|-------------------------|--------------|---------------|---|
| 400 | Common | | No Par Value |

JAN 19 1973
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|-------------------------|--------------|---------------|---|
| 200 | Common | | No Par Value |

Dated February , 1973

Almor Corporation
(NAME OF CORPORATION)

By *Alfred S. Morris Jr.*
Its Pres/Exec

23-7-84 110 50000000