

**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. **51165** 2. Name of Corporation **GANNON GRAPHICS, INC.**  
3. Street Address Principal Business Office **3333 Post Road** City **Warwick** State **Rhode Island** Zip **02886**  
4. Business Phone No. **401-732-3627** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island  
To perform graphic design services to members of the general public

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

President Name <b>Paul R. Vaccaro</b> Street Address <b>58 Edgehill Road</b> City <b>Warwick</b> State <b>Rhode Island</b> Zip <b>02889</b>	Vice President Name <b>Michael J. Keller</b> Street Address <b>318 Brookline Drive</b> City <b>Warwick</b> State <b>Rhode Island</b> Zip <b>02889</b>
Secretary Name <b>Paul R. Vaccaro</b> Street Address <b>58 Edgehill Road</b> City <b>Warwick</b> State <b>Rhode Island</b> Zip <b>02889</b>	Treasurer Name <b>Michael J. Keller</b> Street Address <b>318 Brookline Drive</b> City <b>Warwick</b> State <b>Rhode Island</b> Zip <b>02889</b>

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

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  
**1,000 SHS NO PAR VAL**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**400 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: 2/23/98  
Check No.: 6004  
By: [Signature]

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] 2/19/98  
Signature of Officer Date  
**Paul R. Vaccaro**  
Print or Type Name of Officer  
**President**  
Title of Officer