



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. 20577		2. Name of Corporation Island Associates, Inc.			
3. Street Address Principal Business Office 1015 AQUIDNECK AVENUE		City MIDDLETOWN	State RI	Zip 02842	
4. Business Phone No 4018465610		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 AND DEVELOPMENT					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DELFIN M. MARTIN			Vice President Name ARTHUR G. HANOIAN		
Street Address 761 INDIAN AVENUE			Street Address 4 SULLIVAN LANE		
City MIDDLETOWN	State RI	Zip 02842	City BRISTOL	State RI	Zip 02809
Secretary Name DELFIN M. MARTIN			Treasurer Name ARTHUR G. HANOIAN		
Street Address 761 INDIAN AVENUE			Street Address 4 SULLIVAN LANE		
City MIDDLETOWN	State RI	Zip 02842	City BRISTOL	State RI	Zip 02809
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
600 NO 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



2 0 5 7 7

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.

Delphine M. Martin 1/18/05
Signature of Officer Date
DELFIN M. MARTIN
Print or Type Name of Officer
PRESIDENT
Title of Officer

20577 DBC 01/08/05 12:50:33 PM

File Date 1-18-05

Check No 7788

By *Delphine M. Martin*

FOR SECRETARY OF STATE USE ONLY

Form 630 12/01



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. 20577		2. Name of Corporation Island Associates, Inc.			
3. Street Address Principal Business Office 1015 AQUIDNECK AVENUE			City MIDDLETOWN	State RI	Zip 02842
4. Business Phone No. 4018465610		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 AND DEVELOPMENT					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DELFIN M. MARTIN			Vice President Name LINDA MARTIN		
Street Address 761 INDIAN AVENUE			Street Address 761 INDIAN AVENUE		
City MIDDLETOWN	State RI	Zip 02842	City MIDDLETOWN	State RI	Zip 02842
Secretary Name DELFIN M. MARTIN			Treasurer Name ARTHUR G. HANOIAN		
Street Address 761 INDIAN AVENUE			Street Address 4 SULLIVAN LANE		
City MIDDLETOWN	State RI	Zip 02842	City BRISTOL	State RI	Zip 02809
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
600 NO 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



2 0 5 7 7

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 Delphine M. Martin Date 1/11/04
DELFIN M. MARTIN
Print or Type Name of Officer
PRESIDENT
Title of Officer

20577 DBC 01/11/04 09:28:11 AM

File Date 1-16-04

Check No. 7328

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

ISLAND ASSOCIATES, INC.
1015 AQUIDNECK AVENUE
MIDDLETOWN, RI 02842

ATTACHMENT TO 2004 PROFIT CORPORATION ANNUAL REPORT

8. NAMES AND ADDRESSES OF OFFICERS

VICE PRESIDENT:

MARY HANOIAN
4 SULLIVAN LANE
BRISTOL, RI 02809



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. *20577*		2. Name of Corporation Island Associates, Inc.			
3. Street Address Principal Business Office 1015 AQUIDNECK AVENUE			City MIDDLETOWN	State RI	Zip 02842
4. Business Phone No. 401-846-5610		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 AND DEVELOPMENT					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Delfine M. Martin			Vice President Name Arthur G. Hanoian		
Street Address 761 Indian Avenue			Street Address 4 Sullivan Lane		
City Middletown	State RI	Zip 02842	City Bristol	State RI	Zip 02809
Secretary Name Delfine M. Martin			Treasurer Name Arthur G. Hanoian		
Street Address 761 Indian Avenue			Street Address 4 Sullivan Lane		
City Middletown	State RI	Zip 02842	City Bristol	State RI	Zip 02809
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
600 NO 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



* 2 0 5 7 7 *

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.

Delfine M. Martin 1/11/03
Signature of Officer Date
Delfine M. Martin
Print or Type Name of Officer
President
Title of Officer

20577 DBC1/11/034:59:29 PM

File Date 1-27-03

Check No. 7001

By: UP

FOR SECRETARY OF STATE USE ONLY



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
401-222-3640



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.

20577

2. Name of Corporation

Island Associates, Inc.

3. Street Address Principal Business Office

1015 Aquidneck Avenue

City

Middletown

State

RI

Zip

02842

4. Business Phone No.

401 846-5610

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 and Development

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

President Name

Delfine M. Martin

Street Address

761 Indian Avenue

City Middletown State RI Zip 02842

Vice President Name

Arthur G. Hanoian

Street Address

4 Sullivan Lane

City Bristol State RI Zip 02809

Secretary Name

Delfine M. Martin

Street Address

761 Indian Avenue

City Middletown State RI Zip 02842

Treasurer Name

Arthur G. Hanoian

Street Address

4 Sullivan Lane

City Bristol State RI Zip 02809

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

Director Name

None

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

600 NO PAR VALUE

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



* 2 0 5 7 7 *

File Date 1-17-02

Check No. 6598

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] January 4, 2002

Signature of Officer

Date

Delfine M. Martin

Print or Type Name of Officer

President

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. **20577** 2. Name of Corporation **Island Associates, Inc.**

3. Street Address Principal Business Office **1015 AQUIDNECK AVENUE** City **MIDDLETOWN** State **RI** Zip **02842**
4. Business Phone No. **401 846-5610** 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 AND DEVELOPMENT

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

President Name
DELFINE M. MARTIN

Street Address
761 INDIAN AVENUE

City **MIDDLETOWN** State **RI** Zip **02842**

Secretary Name
DELFINE M. MARTIN

Street Address
761 INDIAN AVENUE

City **MIDDLETOWN** State **RI** Zip **02842**

Vice President Name
ARTHUR G. HANOIAN

Street Address
4 SULLIVAN LANE

City **BRISTOL** State **RI** Zip **02809**

Treasurer Name
ARTHUR G. HANOIAN

Street Address
4 SULLIVAN LANE

City **BRISTOL** State **RI** Zip **02809**

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

Director Name
NONE

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

Number of Shares Class/Series Par Value

600 NO PAR VALUE

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



* 2 0 5 7 7 *

File Date: 1/23

Check No: 9244

By: DM

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.

Delphine Martin **JANUARY 16, 2001**
Signature of Officer Date

DELFINE M. MARTIN
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. **20577** 2. Name of Corporation **Island Associates, Inc.**
3. Street Address Principal Business Office **1015 AQUIDNECK AVENUE** City **MIDDLETOWN** State **RI** Zip **02842**
4. Business Phone No. **401 846-5610** 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 AND DEVELOPMENT

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

President Name DELFINE M. MARTIN Street Address 761 INDIAN AVENUE City MIDDLETOWN State RI Zip 02842 Secretary Name DELFINE M. MARTIN Street Address 761 INDIAN AVENUE City MIDDLETOWN State RI Zip 02842	Vice President Name ARTHUR G. HANOIAN Street Address 4 SULLIVAN LANE City BRISTOL State RI Zip 02809 Treasurer Name ARTHUR G. HANOIAN Street Address 4 SULLIVAN LANE City BRISTOL State RI Zip 02809
--	---

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

Director Name None 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
600 SHS NO PAR VAL

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



* 2 0 5 7 7 *

File Date: 2/3/00
Check No: 5751
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] **DELFINE M. MARTIN** **PRESIDENT**
Signature of Officer Print or Type Name of Officer Title of Officer
Date **FEBRUARY 02, 2000**



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 **20577** 2. Name of Corporation **Island Associates, Inc.**

3. Street Address Principal Business Office **1015 AQUIDNECK AVENUE** City **MIDDLETOWN** State **RI** Zip **02842**
4. Business Phone No **401 846-5610** 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 AND DEVELOPMENT

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

President Name DELFIN M. MARTIN Street Address 761 INDIAN AVENUE City MIDDLETOWN State RI Zip 92842	Vice President Name ARTHUR G. HANOIAN Street Address 4 SULLIVAN LANE City BRISTOL State RI Zip 02809
Secretary Name DELFIN M. MARTIN Street Address 761 INDIAN AVENUE City MIDDLETOWN State RI Zip 02842	Treasurer Name ARTHUR G. HANOIAN Street Address 4 SULLIVAN LANE City BRISTOL State RI Zip 02809

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

Director Name none 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
Number of Shares Class/Series Par Value

600 SHS NO PAR VAL

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 Jan 23, 1999

Check No. 5318

By JD.

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.

Del Martin JANUARY 23, 1999
Signature of Officer Date

DELFIN M MARTIN
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
401-277-3040



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.

2. Name of Corporation

3. Street Address Principal Business Office **20577 Island Associates, Inc.**

City

State

Zip

1015 AQUIDNECK AVENUE

MIDDLETOWN

RI

02842

4. Business Phone No.

5. State of Incorporation

6. SIC Code

401 846-5610

RHODE ISLAND

5538

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

REAL ESTATE RENTAL AND DEVELOPMENT

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

President Name

Vice President Name

DELFINE M. MARTIN

ARTHUR G. HANOIAN

Street Address

Street Address

761 INDIAN AVENUE

4 SULLIVAN LANE

City

State

Zip

City

State

Zip

MIDDLETOWN

RI

02842

BRISTOL

RI

02809

Secretary Name

Treasurer Name

DELFINE M. MARTIN

ARTHUR G. HANOIAN

Street Address

Street Address

761 INDIAN AVENUE

4 SULLIVAN LANE

City

State

Zip

City

State

Zip

MIDDLETOWN

RI

02842

BRISTOL

RI

02809

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

Director Name

Director Name

NONE

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

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

600 SHS NO PAR VAL

200

COMMON

NO PAR

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



* 2 0 5 7 7 *

File Date

Check No.

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.

DELFINE M. MARTIN JANUARY 22, 1998
Signature of Officer Date

DELFINE M. MARTIN
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
401 277-3040



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.

20577

2. Name of Corporation

Island Associates, Inc.

3. Street Address Principal Business Office

1015 AQUIDNECK AVENUE

City

MIDDLETOWN

State

RI

Zip

02842

4. Business Phone No.

401 846-5610

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 AND DEVELOPMENT

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

President Name

DELFINE M. MARTIN

Street Address

761 INDIAN AVENUE

City

State

MIDDLETOWN

RI

Zip

02842

Vice President Name

ARTHUR G. HANOIAN

Street Address

4 SULLIVAN LANE

City

State

BRISTOL

RI

Zip

02809

Secretary Name

DELFINE M. MARTIN

Street Address

761 INDIAN AVENUE

City

State

MIDDLETOWN

RI

Zip

02842

Treasurer Name

ARTHUR G. HANOIAN

Street Address

4 SULLIVAN LANE

City

State

BRISTOL

RI

Zip

02809

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

Director Name

NONE

Street Address

Director Name

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

Number of Shares

Class/Series

Par Value

600 SHS NO PAR VAL

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



* 2 0 5 7 7 *

File Date: 2/12/97

Check No.: 4280

By: COI

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

DELFINE M. MARTIN FEBRUARY 7, 1997
Signature of Officer Date

DELFINE M. MARTIN

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.

2. NAME OF CORPORATION

20577

Island Associates, Inc.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE

CITY

STATE

ZIP CODE

1015 Aquidneck Avenue

Middletown

RI

02842

4. BUSINESS PHONE NO.

5. STATE OF INCORPORATION

6. SIC CODE

401 846-5610

RHODE ISLAND

5538

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

Real estate rental & development

B. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME

VICE PRESIDENT NAME

Delfine M. Martin

Arthur G. Hanoian

STREET ADDRESS

STREET ADDRESS

761 Indian Avenue

4 Sullivan Lane

CITY

CITY

STATE

ZIP CODE

Middletown

RI

02842

Bristol

RI

02809

SECRETARY NAME

TREASURER NAME

Delfine M. Martin

Arthur G. Hanoian

STREET ADDRESS

STREET ADDRESS

761 Indian Avenue

4 Sullivan Lane

CITY

CITY

STATE

ZIP CODE

Middletown

RI

02842

Bristol

RI

02809

DIRECTOR NAME

DIRECTOR NAME

None

STREET ADDRESS

STREET ADDRESS

CITY

CITY

STATE

ZIP CODE

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

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

600 SHS NO PAR VAL Common

200

Common

No Par

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:

3872

By:

@/up

For Secretary of State Use Only

Signature of Officer

Delfine M. Martin

Print or Type Name of Officer

President

January 17, 1996

Title of Officer

Date

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.

0020577

1995

Corporate ID:

Annual Report for the year:

Island Associates, Inc.

Name of 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)

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):

1015 Aquidneck Avenue**Middletown, RI 02842****Real estate rental & development**Phone: **(401) 846-5610****THE NAMES OF THE OFFICERS ARE:**

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Delfine M. Martin	761 Indian Ave., Middletown, RI	02842	
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Arthur G. Hanoian	4 Sullivan Lane, Bristol, RI	02809	
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Delfine M. Martin	761 Indian Ave., Middletown, RI	02842	
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Arthur G. Hanoian	4 Sullivan Lane, Bristol, RI	02809	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
none			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
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

600 common

Number of Shares Class / Series

200 commonDate **January 20,** 19 **95**

By:

*Delfine M. Martin***Delfine M. Martin**

PRINT OR TYPE NAME OF OFFICER SIGNING

President

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.

RONALD A. LEBEL
171 CHASE ROAD, P.O. BOX 8
PORTSMOUTH RI 02871

FILED**JAN 31 1995**By: *[Signature]**2013534*

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: 0020577 Annual Report for the year: 1994
Name of Business Entity: Island Associates, Inc.
Business entity organized under the laws of the State of RI
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):
1015 Aquidneck Avenue
Middletown, RI 02842
Phone: (401) 846-5610
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:
Delfine M. Martin, President
1015 Aquidneck Avenue
Middletown, RI 02842
Brief statement of the character of business conducted in Rhode Island:
Real Estate Development & Rental
Date of Organization: 5-14-79
Date of Qualification to do business in Rhode Island (if foreign entity): _____

THE NAMES OF THE OFFICERS ARE:
☐ CHIEF EXECUTIVE OFFICER OR ☒ PRESIDENT (Check one)
NAME: Delfine M. Martin STREET ADDRESS: 761 Indian Ave., Middletown, RI CITY/STATE: 02840 ZIP CODE:
☐ CHIEF OPERATING OFFICER OR ☒ VICE PRESIDENT (Check one)
NAME: Arthur G. Hanoian STREET ADDRESS: 4 Sullivan Lane, Bristol, RI CITY/STATE: 02809 ZIP CODE:
☐ CLERK AND RECORDS OR ☒ SECRETARY (Check one)
NAME: Delfine M. Martin STREET ADDRESS: 761 Indian Ave., Middletown, RI CITY/STATE: 02840 ZIP CODE:
☐ CHIEF FINANCIAL OFFICER OR ☒ TREASURER (Check one)
NAME: Arthur G. Hanoian STREET ADDRESS: 4 Sullivan Lane, Bristol, RI CITY/STATE: 02809 ZIP CODE:
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	<u>600</u>	NUMBER	<u>200</u>
CLASS	<u>Common</u>	CLASS	<u>Common</u>
SERIES	<u>-</u>	SERIES	<u>-</u>
PAR VALUE OR WITHOUT PAR	<u>No Par</u>	PAR VALUE OR WITHOUT PAR	<u>No Par</u>

Date: 2/15 FILED 94
FEB 18 1994
By: 3217
By: Delfine M. Martin
PRINT OR TYPE NAME OF OFFICER SIGNING: Delfine M. Martin
TITLE OF OFFICER SIGNING: President

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.

RONALD A. LEBEL
171 CHASE ROAD, P.O. BOX 8
PORTSMOUTH RI 02871

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 0020577 Annual Report for the year 1993

FIRST: The name of the corporation is Island Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Real Estate development and rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1015 Aquidneck Ave., Middletown, RI 02840

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>Delfine M. Martin</u>	<u>President</u>	<u>761 Indian Ave., Middletown, RI 02840</u>
<u>Arthur G. Hanoian</u>	<u>Vice President</u>	<u>4 Sullivan Lane, Bristol, RI 02809</u>
<u>Delfine M. Martin</u>	<u>Secretary</u>	<u>761 Indian Ave., Middletown, RI 02840</u>
<u>Arthur G. Hanoian</u>	<u>Treasurer</u>	<u>4 Sullivan Lane, Bristol, RI 02809</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>600</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>

Dated 7/1 19 93

Island Associates, Inc.

(Name of Corporation)

By Delfine Martin

Title 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.....0020577..... Annual Report for the year.....1992.....

FIRST: The name of the corporation is.....Island Associates, Inc.....

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

THIRD: Character of business, briefly stated, is.....Real estate development and
rental.....

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

FIFTH: Business address in Rhode Island 1015 Aquidneck Avenue, Middletown, RI 02840

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

Name

Office

Address (including number, street, zip code)

None	Director	
	Director	
	Director	
Delfine M. Martin	President	761 Indian Ave., Middletown, RI 02840
Arthur G. Hanoian	Vice President	4 Sullivan Lane, Bristol, RI 02809
Delfine M. Martin	Secretary	761 Indian Ave., Middletown, RI 02840
Arthur G. Hanoian	Treasurer	4 Sullivan Lane, Bristol, RI 02809

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

600

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 24 1992

Island Associates, Inc.

(Name of Corporation)

By

Delfine Martin

Title

Pres.

(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 0020577 Annual Report for the year 1991

FIRST: The name of the corporation is Island Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is real estate development and rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1015 Aquidneck Avenue Middletown RI 02840

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

Name	Office	Address (including number, street, zip code)
<u>none</u>	<u>Director</u>	
	<u>Director</u>	
	<u>Director</u>	
<u>Delfine M. Martin</u>	<u>President</u>	<u>761 Indian Ave., Middletown RI 02840</u>
<u>Arthur G. Hanoian</u>	<u>Vice President</u>	<u>4 Sullivan Lane Bristol RI 02809</u>
<u>Delfine M. Martin</u>	<u>Secretary</u>	<u>as above</u>
<u>Arthur G. Hanoian</u>	<u>Treasurer</u>	<u>as above</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>600</u>	<u>common</u>	<u>PAID</u>	<u>no par value</u>

MAR 04 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>

Dated February 22 1991

Island Associates, Inc.

(Name of Corporation)

By Arthur G. Hanoian

Title Vice 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
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0020577..... Annual Report for the year.....1990.....

FIRST: The name of the corporation is.....Island Associates, Inc.....

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

THIRD: Character of business, briefly stated, is.....Real estate development.....

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

FIFTH: Business address in Rhode Island.....538 East Main Rd., Middletown, RI 02840.....

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

Name	Office	Address (including number, street, zip code)
.....	Director
.....	Director
.....	Director
Delfine M. Martin	President	761 Indian Ave., Middletown, RI 02840
Arthur G. Hanoian	Vice President	4 Sullivan Lane, Bristol, RI 02809
Delfine M. Martin	Secretary	761 Indian Ave., Middletown, RI 02840
Arthur G. Hanoian	Treasurer	4 Sullivan Lane, Bristol, RI 02809

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	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.....February 10, 19 90.....

Island Associates, Inc.

(Name of Corporation)

By.....

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
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

gld

Corporate ID 0020577 Annual Report for the year 1989

FIRST: The name of the corporation is Island Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

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

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 538 East Main Road
Middletown, RI 02840

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Delfine M. Martin President 761 Indian Ave., Middletown, RI 02840

Arthur G. Hanoian Vice President 4 Sullivan Lane, Bristol, RI 02809

Delfine M. Martin Secretary 761 Indian Ave., Middletown, RI 02840

Arthur G. Hanoian Treasurer 4 Sullivan Lane, Bristol, RI 02809

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

600

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
FEB 24 1989
RECEIVED OF STATE

Dated February 13, 19 89

Island Associates, Inc.
(Name of Corporation)

By Delfine M. Martin

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 20577 Annual Report for the year 1988

FIRST: The name of the corporation is Island Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is real estate development

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 26 Bellevue Avenue
Newport, RI 02840

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>Delfine M. Martin</u>	<u>President</u>	<u>761 Indian Ave., Middletown, RI 02840</u>
<u>Arthur G. Hanoian</u>	<u>Vice President</u>	<u>4 Sullivan Lane, Bristol, RI 02809</u>
<u>Delfine M. Martin</u>	<u>Secretary</u>	<u>761 Indian Ave., Middletown, RI 02840</u>
<u>Arthur G. Hanoian</u>	<u>Treasurer</u>	<u>4 Sullivan Lane, Bristol, RI 02809</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>600</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>

Dated February 27 19 88

Island Associates, Inc.

(Name of Corporation)

By Delfine M. Martin

Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

January 1st and March 1st

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....20577..... Annual Report for the year.....1987.....

FIRST: The name of the corporation is.....Island Associates, Inc.....

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

THIRD: Character of business, briefly stated, is.....real estate development.....

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

FIFTH: Business address in Rhode Island.....26 Bellevue Avenue.....

Newport, Rhode Island 02840

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Delfine M. Martin

President

761 Indian Avenue, Middletown, Rhode Island

Arthur C. Hanoian

Vice President

4 Sullivan Lane, Bristol, Rhode Island

Delfine M. Martin

Secretary

761 Indian Avenue, Middletown, Rhode Island

Arthur C. Hanoian

Treasurer

4 Sullivan Lane, Bristol, Rhode Island

SEVENTH: Number of Shares authorized:

No. of Shares

Class

PAID Series

Par Value
or statement that
shares are without
par value

600

common

MAR 30 1987

no par value

EIGHTH: Number of Shares issued:

SECY. OF STATE

APR 10 1987

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

200

common

no par value

Dated.....February.....27.....19.....87.....

Island Associates, Inc.

(Name of Corporation)

By.....

Delfine Martin

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.....20577..... Annual Report for the year.....1987.....

FIRST: The name of the corporation is.....Island Associates, Inc.....

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

THIRD: Character of business, briefly stated, is.....real estate development.....

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

FIFTH: Business address in Rhode Island.....26 Bellevue Avenue.....

.....Newport, Rhode Island 02840.....

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Delfine M. Martin President 761 Indian Avenue, Middletown, Rhode Island

Arthur C. Hanoian Vice President 4 Sullivan Lane, Bristol, Rhode Island

Delfine M. Martin Secretary 761 Indian Avenue, Middletown, Rhode Island

Arthur C. Hanoian Treasurer 4 Sullivan Lane, Bristol, Rhode Island

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

600

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

MAR 27 1987

SECY OF STATE

Dated February 22 19 87

Island Associates, Inc.

(Name of Corporation)

By

President

(Report must be signed by an officer)

Title

State of Rhode Island and Providence PlantationsCORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903Corporate ID 20577 Annual Report for the year 1986FIRST: The name of the corporation is Island Associates, Inc.SECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is real estate development

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 26 Bellevue Avenue
Newport, RI 02840

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Delfine M. Martin	President	761 Indian Avenue, Middletown, RI
Arthur G. Hanoian	Vice President	4 Sullivan Lane, Bristol, RI
Delfine M. Martin	Secretary	761 Indian Avenue, Middletown, RI
Arthur G. Hanoian	Treasurer	4 Sullivan Lane, Bristol, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	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 February 10 19 86Island Associates, Inc.

(Name of Corporation)

By Delfine M. Martin
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 20577 Annual Report for the year 1985

FIRST: The name of the corporation is Island Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is real estate development

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 26 Bellevue Avenue

Newport, RI 02840

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>Delfine M. Martin</u>	<u>President</u>	<u>261 Indian Avenue, Middletown</u>
<u>Arthur G. Hanoian</u>	<u>Vice President</u>	<u>4 Sullivan Lane, Bristol, RI</u>
<u>Delfine M. Martin</u>	<u>Secretary</u>	<u>261 Indian Avenue, Middletown, RI</u>
<u>Arthur G. Hanoian</u>	<u>Treasurer</u>	<u>4 Sullivan Lane, Bristol, RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>600</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>

Dated February 25th 19 85

Island Associates, Inc.
(Name of Corporation)

By Delfine M. Martin

(Report must be signed by an officer)

Title President

Form 31 1/85

02/26/85 PAID

Island Associates, Inc.
DELFIN M. MARTIN
26 BELLEVUE AVE
NEWPORT, R.I.
02840

AMRE 15.00
CHK 15.00
0301A001

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 Island Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is real estate development

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

26 Bellevue Avenue, Newport, Rhode Island 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Delfine M. Martin	President	761 Indian Ave., Middletown, R.I.
Arthur G. Hanoian	Vice President	4 Sullivan Lane, Bristol, R.I.
Delfine M. Martin	Secretary	761 Indian Ave., Middletown, R.I.
Arthur G. Hanoian	Treasurer	4 Sullivan Lane, Bristol, R.I.

(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
600	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	2	no par value

Dated: January 20, 19 84

Island Associates, Inc.

(Name of Corporation)

By *Delfine M. Martin*

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 1983

FIRST: The name of the corporation is Island Associates, Inc.

SECOND: It is incorporated under the laws of R.I.

THIRD: Character of business, briefly stated, is real estate development

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 26 Bellevue Avenue, Newport, R.I. 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Delfine M. Martin	President	761 Indian Avenue., Middletown, R.I.
Arthur G. Hanoian	Vice President	4 Sullivan Lane, Bristol, R.I.
Delfine M. Martin	Secretary	761 Indian Avenue, Middletown, R.I.
Arthur G. Hanoian	Treasurer	4 Sullivan Lane, Bristol, R.I.

(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
600	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, 1983

Island Associates, Inc.

(Name of Corporation)

By

Delfine M. Martin

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

JAN 26 1983

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 Island Associates, Inc.

SECOND: It is incorporated under the laws of R.I.

THIRD: Character of business, briefly stated, is
real estate development

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) 761 Indian Avenue, Middletown, R.I. 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Delfine M. Martin	President	761 Indian Ave., Middletown, R.I.
Arthur G. Hancian	Vice President	4 Sullivan Lane, Bristol, R.I.
Delfine M. Martin	Secretary	761 Indian Ave., Middletown, R.I.
Arthur G. Hancian	Treasurer	4 Sullivan Lane, Bristol, R.I.

(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
600	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: Jan 11 19 82 Island Associates, Inc.

(Name of Corporation)

By Delfine Martin

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

JAN 12 1982 *Inc*

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

Island Associates, Inc.

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 Island Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
761 Indian Avenue, Middletown, Rhode Island 02840

and the name of its registered agent in Rhode Island at such address is
Delfine M. Martin

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 the purchase, development and sale of real estate.

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

Name	Office	Address
	Director	
	Director	
	Director	
	Director	
	Director	
	Director	
Delfine. M. Martin	President	761 Indian Ave., Middletown, RI
Arthur G. Hanolan	Vice President	4 Sullivan Lane, Bristol, RI
Delfine M. Martin	Secretary	761 Indian Ave., Middletown, RI
Arthur G. Hanolan	Treasurer	4 Sullivan Lane, Bristol, RI

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
600	common	--	3 24 81 No par value

MAR 27 1981

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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 February 10,, 19 81

Island Associates, Inc.

(NAME OF CORPORATION)

By

Arthur G. Hanolan
Arthur G. Hanolan

Its Vice-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

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600	common	2 5 80	No par value

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FEB 6 1980

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:

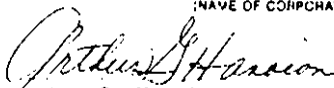
<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
200	common	--	No par value

Dated January 15, , 19 80

Island Associates, Inc.

(NAME OF CORPORATION)

By



Arthur G. Hanolian

Its Vice-President