

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, RJ 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 BL		~					
1. Carporate ID No.	2. Name of Corporation						
129685	DNP Corp						
3. Street Address Principal Business Office		<u></u>	City	State	Zip		
66 NORTH MAIN STREET			PASCOAG	RI	02859-		
4. Business Phone No.		5. State of Incorporation			6. SIC Code		
4065688700 RHODE ISLA		RHODE ISLAND			7286		
7. Brief Description of the Charac BUSINESS COACHING	eter of Business Conduct	ed in Rhode Island					
8. NAMES AND ADDRESS President Name	ES OF THE OFFICE	ERS ("X" BOX FOR ATTA	CHMENT) TILL IN SPACES	BEFORE USING ATTA	CHMENTS		
Penny Ferretti			None				
Street Address			Street Address				
603 Treasure Island	d Road		. None				
City	State	Zip	City	State	Zip		
Webster	MA	01570	None	None	None		
Sccretary Name		• • • • • • • • • • • • • • • • • • • •	Treasurer Name	• • • • • • • • • • • •			
Penny Ferretti			Penny Ferretti				
Street Address			Street Address				
603 Treasure Island	d Road		.603 Treasure Island Road				
City	State	Zip	City	State	Zip		
Webster	MA	01570	. Webster	MA	01570		
9. NAMES AND ADDRESS	ES OF THE DIRECT	TORS ("X" BOX FOR AT	TACHMENT FILL IN SPACE Director Name	ES BEFORE USING ATT	ACHMENTS .		
None			· None				
Street Address			. Street Address				
None			None				
City	State	Zip	•City	State	Zip		
None	None	None	None	None	None		
Director Name	· · · · · · · · · · · · ·	•, • • • • • • • • • •	Director Name	• • • • • • • • • • • •			
None			None				
None Street Address			None Street Address				
None Since Address None			· Street Address · None				
None Siret Address None City	Sate	Zip	Street Address None City	Sate	Zip		
None Street Address None City None	None	None	· Street Address · None	State None	Zip None		
None Since Address None City None 10. SHARES AUTHORIZE	None	None	Street Address None City None 11. SHARES ISSUED ("X" ROX	None	None		
None Since Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES	None D'("X" BOX FOR ATT	None	Street Address None City None 11. SHARES ISSUED ("X" BO) ISSUED SHARES	None X FOR ATTACHMENT)	None		
None Since Address None City None 10. SHARES AUTHORIZE	None	None	Street Address None City None 11. SHARES ISSUED ("X" ROX	None	None		
None Since Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES	None D. ("X" BOX FOR ATT. Class/Series	None	Street Address None City None 11. SHARES ISSUED ("X" BO) ISSUED SHARES	None X FOR ATTACHMENT)	None		
None Sircet Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares	None D. ("X" BOX FOR ATT. Class/Series	None	Sreet Address None City None 11. SHARES ISSUED ("X" BO) ISSUED SHARES Number of Shares	None X FOR ATTACHMENT) Class/Series	None Par Value		
None Street Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares 1,500 \$0.01 PAR VALUE	None D. ("X" BOX FOR ATT. Class/Series	None ACHMENT) 1	None None City None 11. SHARES ISSUED ("X" RO) ISSUED SHARES Number of Shares None None	None X FOR ATTACHMENT) Class/Series None None	None Par Value None None		
None Street Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares 1,500 \$0.01 PAR VALUE	None D. ("X" BOX FOR ATT. Class/Series	None ACHMENT) 1	Street Address None City None 11 SHARES ISSUED ("X" RO) ISSUED SHARES Number of Shares None	None X FOR ATTACHMENT) Class/Series None None	None Par Value None None		
None Street Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares 1,500 \$0.01 PAR VALUE	None D. ("X" BOX FOR ATT. Class/Series	None ACHMENT) 1	None City None 11. SHARES ISSUED ("X" RO) ISSUED SHARES Number of Shares None None None	None Class/Series None None Secretary, Treasurer	None Par Value None None Receiver or Trustee		
None Sircer Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares 1,500 \$0.01 PAR VALUE	None D. ("X" BOX FOR ATT. Class/Series	None ACHMENT) 1	None City None 11. SHARES ISSUED ("X" RO) ISSUED SHARES Number of Shares None None None Under penalty of perjury,	None Class/Series None None Secretary, Treasurer declare and affirm that	None Par Value None None Receiver or Trustee		
None Sircet Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares 1,500 \$0.01 PAR VALUE This report must be signed	None D. C.X. BOX FOR ATT. Class/Series in ink by either the	None ACHMENT) 1	None City None 11. SHARES ISSUED ("X" RO) ISSUED SHARES Number of Shares None None None Under penalty of perjury, this report, including any a	None Class/Series None None Secretary, Treasurer I declare and affirm that	None Par Value None None Receiver or Trustee I have examined and statements,		
None Sircer Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares 1,500 \$0.01 PAR VALUE	None D. ("X" BOX FOR ATT. Class/Series	None ACHMENT) 1	None City None 11. SHARES ISSUED ("X" RO) ISSUED SHARES Number of Shares None None None Under penalty of perjury,	None Class/Series None None Secretary, Treasurer I declare and affirm that	None Par Value None None Receiver or Trustee I have examined and statements,		
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None Street Address None City None 10. SHARES AUTHORIZE AUTHORIZED SHARES Number of Shares 1,500 \$0.01 PAR VALUE This report must be signed 1 2 9 *129685 DBC 02/28 File Date MAR (Check No.	None Class/Series in ink by either the series 1 2005	None ACHMENT) 1	Street Address None City None 11. SHARES ISSUED ("X" BO) ISSUED SHARES Number of Shares None None None Under penalty of perjury, this report, including any and that all statements considering and that all statements considering for the signature of Officer Penny Fer	None Class/Series None None Secretary, Treasurer I declare and affirm that	None Par Value None None Receiver or Trustee I have examined and statements, id correct.		



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FOR SECRETARY OF STATE USE ONLY

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PROFIT CORP Filing Period: January 1 (FORM MUST BE TYPED OR 1	- March I • Fili	NUAL REPOI	RT FOR THE YE	AR2004	4			
1. Corporate ID No.		2. Name of Corporation						
129685	DNP Corp							
3. Street Address Principal Busin			Pascoag	State R.I	O2859			
4. Business Phone No. 406 - 568-8700		5. State of Incorporation RHODE ISLAN	<i>n</i>		6 SIC Code 7284			
7. Brief Description of the Chara BUSINESS COACH	icter of Business Conducted i	Rhode Island	. .		1			
8. NAMES AND ADDRES	_	S: ("X" BOX FOR AT	TACHMENT) FILL II	N SPACES BEFORE USING	ATTACHMENTS			
Penny Ferretti			Vice President Name None					
603 Treasure Island Road			Street Address NONE					
Webster	State MA	^{Zip} 0/570	MONE	State	NONE			
scerolary Name Ferretti			Tragurer Name Penny Ferretti					
603 Treasure Island Road			603 Treasure Island Road					
webster	State	Zip 01570	Webster	State MA	7.ip 01570			
9. NAMES AND ADDRES	SES OF THE DIRECTO	ORS: ("X" BOX FOR	ATTACHMENT) FILL	IN SPACES BEFORE USIN	•			
Director Name Note			Director Name					
Street Address	· · · · · · · · · · · · · · · · · · ·		Street Address	 				
None			NONE					
NONE	State NONE	NONE	City ₩	State	NONE			
Director Name None			Director Name None					
Since Address NONE			Street Address NONE					
No NE	State NONE	Zip	City	State	NONE			
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)					
AUTHORIZED SHARES Number of Shares	Class/Series	Par Value	ISSUED SHARES Number of Shares Class/Series Par Value					
1,500 \$0.01 PAR VALUE			NONL	None	None			
NOVE			NONE	NONE	NONE			
- * · · · · · · · · · · · · · · · · · ·	1-2-9-6-8-5	her the President. Vice	including any acco	tant Secretary, Treasurer, I berjury, I declare and affirm the ompanying schedules and state true and correct.	at I have examined this rep			
Check No. 140			Signuture of Officer	Jewer .	23-20 <u>1</u> Date			
By: UP			Print or Typt Name of Officer					