



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. 129685		2. Name of Corporation DNP Corp			
3. Street Address Principal Business Office 66 NORTH MAIN STREET		City PASCOAG	State RI	Zip 02859-	
4. Business Phone No. 4065688700		5. State of Incorporation RHODE ISLAND			6. SIC Code 7286
7. Brief Description of the Character of Business Conducted in Rhode Island BUSINESS COACHING					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Penny Ferretti		Vice President Name None			
Street Address 603 Treasure Island Road		Street Address None			
City Webster	State MA	Zip 01570	City None	State None	Zip None
Secretary Name Penny Ferretti		Treasurer Name Penny Ferretti			
Street Address 603 Treasure Island Road		Street Address 603 Treasure Island Road			
City Webster	State MA	Zip 01570	City Webster	State MA	Zip 01570
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 None			
Street Address None		Street Address None			
City None	State None	Zip None	City None	State None	Zip None
Director Name None		Director Name None			
Street Address None		Street Address None			
City None	State None	Zip None	City None	State None	Zip None
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
1,500	\$0.01 PAR VALUE		None	None	None
			None	None	None

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



1 2 9 6 8 5

\*129685 DBC 02/28/05 10:10 PM\*

FILED

File Date MAR 01 2005

Check No. 1381

By KB

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.

Penny Ferretti 2-25-2005  
Signature of Officer Date  
Penny Ferretti  
Print or Type Name of Officer  
President  
Title of Officer



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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 129685		2. Name of Corporation DNP Corp			
3. Street Address Principal Business Office 66 N. Main Street			City Pascoag	State RI	Zip 02859
4. Business Phone No. 406-568-8700		5. State of Incorporation RHODE ISLAND			6. SIC Code 7286
7. Brief Description of the Character of Business Conducted in Rhode Island BUSINESS COACHING					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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City Webster	State MA	Zip 01570	City None	State None	Zip None
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City None	State None	Zip None	City None	State None	Zip None
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Street Address None			Street Address None		
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AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,500 \$0.01 PAR VALUE			None	None	None
None			None	None	None

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



\* 1 2 9 6 8 5 \*

File Date	3-16-04
Check No.	1149
By:	UP
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: Penny Ferretti  
Date: 2-25-2004  
Print or Type Name of Officer: Penny Ferretti  
Title of Officer: President