

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, Rt 02904-2615
401.222,3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _____2010

Filing Period: January 1 - March 1 • Filing Fee: \$50,00" • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

1. Corporate ID No. 32096		2. Name of Corporation ELIZABETH ALDEN, INC.				
3. Street Address Principal Business Office 133 Old Tower Hill Road, Ste. 1		City Wakefield	State RI	χίρ 02879		
7. Business Phone No Rhode Island						
6 Brief Description of the Cl To own and operate	a charter boat					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Thomas Greene		CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Sharon Greene				
Street Address 120-9 Prospect Street			Street Address 120-9 Prospect Street			
cio Ridgefield	State CT	Zip 06877	City Ridgefield	State CT	^{Zip} 06877	
Secretary Name Sharon Greene			Treasurer Name Thomas Greene			
Street Address 120-9 Prospect Street			Street Address 120-9 Prospect Street			
_{ंगः} Ridgefield	State CT	^{2ip} 06877	city Ridgefield	CT State	^{Zip} 06877	
8. NAMES AND ADDR Director Name Thomas Greene	RESSES OF THE DIRE	ECTORS: ("X" BOX FOR AT	TACHMENT)	N SPACES BEFORE USIN	G ATTACHMENT	
Street Address 120-9 Prospect Street			Street Address 120-9 Prospect Street			
ciy Ridgefield	State CT	2ip 06877	City Ridgefield	State CT	7ip 06877	
Director Name	•		Director Name	••••••••••••	••••••	
Street Address			Street Address			
Сйу	State	Zip	City	State	Zip	
). SHARES AUTHORIZ	ZED	ı		 D <i>("X" BOX FOR ATTAC</i> ECTION <u>MUST</u> BE COMPLETED		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value	
			100	Common	No Par	
			<u> </u>			
		he corporation by an authorize e corporation by the receiver		corporation is in the hand	s of a receiver or	
					_	

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

By: By 383

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

Date

Thomas Greene

Print or Type Name

President

Title

Form 630 Rev, 08/08