



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
PROVIDENCE, RHODE ISLAND 02907-2015  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>000518600</b>		2. Name of Corporation <b>The Law Office of Katherine Godin, Inc.</b>			
3. Street Address Principal Business Office <b>615 Jefferson Blvd.</b>			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
4. Business Phone No. <b>401-274-2423</b>		5. State of Incorporation <b>Rhode Island</b>			
6. Brief Description of the Character of Business Conducted in Rhode Island <b>Law office, any ancillary purposes, and all other lawful purposes</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Katherine Godin, Esq.</b>			Vice President Name		
Street Address <b>615 Jefferson Blvd.</b>			Street Address		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City	State	Zip
Secretary Name <b>Katherine Godin, Esq.</b>			Treasurer Name <b>Katherine Godin, Esq.</b>		
Street Address <b>615 Jefferson Blvd.</b>			Street Address <b>615 Jefferson Blvd.</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
ISSUED SHARES - THIS SECTION <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	
		<b>100 Shares Common Stock \$0.01 Par Value</b>			

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

**FILED**

**JAN 27 2014**

BY

**1352**

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.

*Katherine Godin*  
Signature

**1/16/14**  
Date

**Katherine Godin, Esq.**

Print or Type Name

**President**

Title

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY