



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, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 *

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 137518		2. Name of Corporation United Independent Liquor Retailers Association of Rhode Island, Inc.			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 321 SOUTH MAIN STREET		City PROVIDENCE	Zip 02903-
5. Foreign corporation: Enter principal office address		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO PROMOTE AND REPRESENT THE COMMON BUSINESS INTERESTS OF AND IMPROVE BUSINESS CONDITIONS AMONG, MEMBERS OF THE INDEPENDENT RETAIL LIQUOR INDUSTRY					
President Name Elliott N. Fishbein			Vice President Name Ronald McGreen		
Street Address 179 Newport Avenue			Street Address		
City East Providence	State RI	Zip 02914	City	State	Zip
Secretary Name Jane E. Costanza			Treasurer Name Thomas F. Saccocia		
Street Address 667 Kingstown Road			Street Address 2069 Smith Street		
City Wakefield	State RI	Zip 02879	City North Providence	State RI	Zip 02911
7. List of Directors of Domestic (Rhode Island) Corporation in State Not Less Than Three (3) Directors					
Director Name Elliott N. Fishbein			Director Name Ronald McGreen		
Street Address 179 Newport Avenue			Street Address		
City East Providence	State RI	Zip 02914	City	State	Zip
Director Name Jane E. Costanza			Director Name Thomas F. Saccocia		
Street Address 667 Kingstown Road			Street Address 2069 Smith Street		
City Wakefield	State RI	Zip 02879	City North Providence	State RI	Zip 02911
8. List of Agents of Foreign Corporation in State Not Less Than One (1) Agent					
Agent Name Arthur J Leonard Esq.			Address		
Address 321 South Main Street, Suite 301			City Providence	Zip 02903	

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



FILED

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File Date **OCT 11 2007**

Check No. **By 1009 1070**

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.

Signature of Officer *Jane E. Costanza* Date *7/26/07*
Jane E. Costanza

Print or Type Name of Officer

Secretary

Title of Officer