



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

Fee: \$50.00

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

*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.*

**ANNUAL REPORT YEAR:** 2008

**1. Corporate ID No.** 000002133

**2. Name of Corporation** BEACON ONE, INC.

**3. Street Address Principal Business Office:**

No. and Street: 148 HARGRAVES DRIVE

City or Town: PORTSMOUTH

State: RI

Zip: 02871

Country: USA

**4. Business Phone No.**

4016833494

**5. State of Incorporation**

State: RI

**6. Brief Description of the Character of Business Conducted in Rhode Island**

GENERAL REAL ESTATE

**7. Names and Addresses of the Officers and Directors:**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER	DAVID B HAYES	148 HARGRAVES DRIVE PORTSMOUTH, RI 02871 USA
SECRETARY	DAVID B HAYES	148 HARGRAVES DRIVE PORTSMOUTH, RI 02871 USA
ASSISTANT SECRETARY	ROBERT M SILVA	1100 AQUIDNECK AVENUE MIDDLETOWN, RI 02842 USA
PRESIDENT	DAVID B HAYES	148 HARGRAVES DRIVE PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	DAVID B HAYES	148 HARGRAVES DRIVE PORTSMOUTH, RI 02871 USA

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	1,000.00	100

**9. 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.**

**Signed this 13 Day of February, 2008 at 12:35:54 PM by the general partner(s).** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By ROBERT M. SILVA  
Signature of Authorized Representative of the Corporation

ASSISTANT SECRETARY  
Title

Form No. 630  
Revised 09/07

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