



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 2008**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 110691		2. Name of Corporation THE BRISTOL LIGHTHOUSE, LTD.			
3. Street Address Principal Business Office 18 Monkey Wrench Lane			City Bristol	State RI	Zip 02809
4. Business Phone No. (401) 254-1524		5. State of Incorporation Rhode Island		6. SIC Code 1883	
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF DESIGNING, MANUFACTURING, ASSEMBLING AND MARKETING OF FLASHLIGHTS AND FLASHLIGHT BATTERIES					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David C. Esty			Vice President Name Asterio H. Sousa		
Street Address 18 Monkey Wrench Lane			Street Address 41 Constitution Street		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name John G. Rego			Treasurer Name Ronald J. Rodrigues		
Street Address 1199 Hope Street			Street Address 209 Hope Street		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name David C. Esty			Director Name Ronald J. Rodrigues		
Street Address 18 Monkey Wrench Lane			Street Address 209 Hope Street		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Director Name Asterio H. Sousa			Director Name John G. Rego		
Street Address 41 Constitution Street			Street Address 1199 Hope Street		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
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
4,000	COMMON NO PAR VALUE		2,000	COMMON	NO PAR

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



1 1 0 6 9 1

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.

*Ronald J. Rodrigues* 01/21/08  
Signature of Officer Date  
Ronald J. Rodrigues  
Print or Type Name of Officer  
Treasurer  
Title of Officer

**FILED**

File Date JAN 28 2008

Check No. 18-14023

By: DS-14023

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