



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

Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3044

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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. 1860		2. Name of Corporation Baffoni's Poultry Farm, Inc.			
Street Address Principal Business Office 320 Greenville Avenue			City Johnston	State RI	Zip 02919
Business Phone No. 944-2647		5. State of Incorporation Rhode Island			
Brief Description of the Character of Business Conducted in Rhode Island Poultry Farm					

NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Albert Baffoni			Vice President Name Donald Baffoni		
Street Address 320 Greenville Avenue			Street Address c/o 320 Greenville Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Albert Baffoni			Treasurer Name Donald Baffoni		
Street Address c/o 320 Greenville Avenue			Street Address 320 Greenville Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919

NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Albert Baffoni			Director Name Donald Baffoni		
Street Address c/o 320 Greenville Avenue			Street Address 320 Greenville Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Director Name Albert Baffoni			Director Name Donald Baffoni		
Street Address Same			Street Address Same		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
400 Shares	No Par	Common

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value
200	Common	No Par

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

NOV 14 2008

File Date **By** 073199 3:29
Check No. _____
By: _____

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.

Albert Baffoni
Signature Date

ALBERT BAFFONI
Print or Type Name

President
Title

FOR SECRETARY OF STATE USE ONLY