



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

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009**

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. 103786		2. Name of Corporation BAL, Inc.			
3. Street Address Principal Business Office 150 Franklin Street			City Bristol	State RI	Zip 02809
4. Business Phone No. 401-253-2080		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Bette Walpole			Vice President Name David Tarantelli		
Street Address 30 Bay View Avenue			Street Address 203 Water Street		
City Bristol	State RI	Zip 02809	City Warren	State RI	Zip 02885
Secretary Name Russell Mello			Treasurer Name Joseph Farmer		
Street Address 87 Arlington Avenue			Street Address 24 Jane Lane		
City Warren	State RI	Zip 02885	City Bristol	State RI	Zip 02809
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Russell Serpa			Director Name Matthew White		
Street Address 395 Metacom Avenue			Street Address 15 Verndale		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Director Name Robert McKenna			Director Name David Rattray		
Street Address 62 Kingswood Road			Street Address 150 Franklin Street # 237		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	\$1.00	Par Value	1.00		Par Value

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.

<b>FILED</b>	
File Date	JAN 15 2009
Check No.	
By:	By 2455
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.

*Elizabeth R. Walpole*  
Signature \_\_\_\_\_ Date \_\_\_\_\_  
Elizabeth Walpole  
Print or Type Name \_\_\_\_\_  
President  
Title \_\_\_\_\_