

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

401.222.30

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(cd-d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 5917 BROWNSTONE, INC. 3. Street Address Principal Business Office City NEWPORT RI 4. Business Phone No. 401-846-5652 State of Incorporation RHODE ISLAND 6. Piref Description of the Character of Business Conducted in Rhode Island BAR AND RESTAURANT FILL IN SPACES BEFORE USING A President Name Vice President Name GARY J. KILROY DAVID KILROY Street Address 285 THIRD BEACH ROAD City MIDDLETOWN RI 02842 MIDDLETOWN RI Secretary Name GARY J. KILROY Street Address Street Address DONNIE KILROY State RI Secretary Name GARY J. KILROY Street Address Street Address City State City State GARY J. KILROY Street Address Street Address Street Address City Street Address Street Address Street Address City State City State City RI City State City NEWPORT RI O2840 MIDDLETOWN RI State RI O2840 MIDDLETOWN RI	2ip 02840 ATTACHMENTS 2ip 02842
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President Name GARY J. KILROY Street Address 285 THIRD BEACH ROAD State RI Secretary: Name BONNIE KILROY Street Address 1 ELLA TERRACE State RI State GARY J. KILROY Street Address 1 ELLA TERRACE State RI Sta	^{Zip} 02842
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NEWPORT RI 02840 MIDDLETOWN RI	Zitz
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING	02842
	3 ATTACHMENTS
Director Name Director Name	
GARY J. KILROY DAVID KILROY	
Street Address Street Address	
285 THIRD BEACH ROAD PARADISE AVENUE	
City State Zip City State	Zip
MIDDLETOWN RI 02842 MIDDLETOWN RI	02842
Director Name Director Name	
NONE NONE	
Street Address Street Address	
City State Zip City State	Zip
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9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACH	IMENI)
ISSUED SHARES — THIS SECTION MUST BE COMPLETED	n. 17.2
This information is currently of record in the Office of the Secretary of Number of Shares Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of instruction sheet.	NO PAR
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this report must be executed on behalf of the corporation by the receiver or trustee.

BROWNS FORE TO D
Check No. JAN 2 0 2009
By 27152
FOR SECRETARY OF STATE USE ONLY

Inder penalty of perjury, I declare and including any accompanting schedule	es and statements, and that all stat
contained herein are true and correct.	11-12-08
Signature	Date
GARY J. KILROY	
Print or Type Name	
PRESIDENT	