



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. 153804		2. Name of Corporation RENOVA LIGHTING SYSTEMS, INC.			
3. Street Address Principal Business Office 15 Wellstown Road			City Ashaway	State RI	Zip 02804
4. Business Phone No. 4016821850		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island To carry on research in and to manufacture, market, sell and distribute fluorescent lighting fixtures and appurtenant materials.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard D. Edwards, Jr.			Vice President Name David E. Nadeau		
Street Address 13 Stonehill Drive			Street Address 297 Wickham Road		
City Westerly	State RI	Zip 02891	City North Kingstown	State RI	Zip 02852
Secretary Name David E. Nadeau			Treasurer Name David E. Nadeau		
Street Address 297 Wickham Road			Street Address 297 Wickham Road		
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Richard D. Edwards, Jr.			Director Name David E. Nadeau		
Street Address 13 Stonehill Drive			Street Address 297 Wickham Road		
City Westerly	State RI	Zip 02891	City North Kingstown	State RI	Zip 02852
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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	\$0.01 PAR VALUE		1,000	Common	\$0.01

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	
File Date	JAN 28 2009
Check No.	
By	By 1224
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.

Signature

Date

David E. Nadeau

Print or Type Name

Vice President

Title