



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

A. Ralph Molis, 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. 114081		2. Name of Corporation Bresnahan & Associates, Inc.			
3. Street Address Principal Business Office 10 Gray Birch Drive			City Cranston	State R.I.	Zip 02921
4. Business Phone No. (401) 944-7119		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island To serve as representatives to various manufacturers in the automotive aftermarket.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jeffrey Poor			Vice President Name David T. Pulsifer, Jr.		
Street Address 10 Hunt Street			Street Address 10 Gray Birch Drive		
City Peabody	State MA	Zip 01960	City Cranston	State RI	Zip 02921
Secretary Name Jeffrey Poor			Treasurer Name David T. Pulsifer, Jr.		
Street Address 10 Hunt Street			Street Address 10 Gray Birch Drive		
City Peabody	State MA	Zip 01960	City Cranston	State RI	Zip 02921
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Jeffrey Poor			Director Name David T. Pulsifer, Jr.		
Street Address 10 Hunt Street			Street Address 10 Gray Birch Drive		
City Peabody	State MA	Zip 01960	City Cranston	State RI	Zip 02921
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			200	Common	No 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.

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
JEFFREY POOR

Print or Type Name
PRESIDENT

Title

Date
1-25/09

FILED
File Date FEB 26 2009
Check No.
By 1570
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