

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

Filling Period: January 1 - March 1 • Filling 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(cerd)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 36904	BEAVER	2. Name of Corporation BEAVER RIVER FARMS, INC.			
3. Street Address Principal Business Office 9 Canal Street			Ctty Westerly	State RI	<i>Σψ</i> 02891
4. Bustness Phone No. 401-364-6922 5. State of Incorporation RHODE ISLAND		<u>н, , , , , , , , , , , , , , , , , , , </u>			
6. Brief Description of the Chan Light trucking and grou	ucter of Business Condu nds maintenance	cted in Rhode Island			
resident same	SSES OF THE OFF	ICERS: ("X" BOX FOR ATTA	CHMENT) TELL IN Vice President Name	SPACES BEFORE USING	G ATTACHMENTS
Brian W. Curtis			Raymond Todd Curtis		
Street Address 183 Highfield Drive, PO Box 697			Street Address Hawksbill Way, PO Box 264		
City Brownsville	State VT	^{Zip} 05037	Kenyon	Siate RI	<i>Zip</i> 02898
Secretary Name Brian W. Curtis			Treasurer Name Raymond Todd Curtis		
Street Address 183 Highfield Drive, PO Box 697			Street Address Hawksbill Way, PO Box 264		
City Brownsville	State VT	^{Zip} 05037	Ctty Kenyon	State Ri	<i>Zip</i> 02898
Brian W. Curtis	SSES OF THE DIRE	ECTORS: ("X" BOX FOR ATT	[ACHMENT]		NG ATTACHMENTS
Street Address 183 Highfield Drive, PO Box 697			Street Address Hawksbill Way, PO Box 264		
City	State	Zip	City	State	Zijo
Brownsville Director Name	JVT	05037	Kenyon	RI	02898
none			Director Name none		
Street Address			Street Address		
Oily .	State	Zip	СИз	State	Zip
). SHARES AUTHORIZEI	D	l		 <i>("X" BOX FOR ATTAC.</i> CTION <u>MUST</u> BE COMPLETED	
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.			Number of Shares	Class/Series	Par Value
			1,000	Common	NPV
			M		
This report must be executhis report must be execut	ited on behalf of the	e corporation by an authorize corporation by the receiver c	d representative. If the contractor	corporation is in the hand	s of a receiver or tru

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n. •	
By:	ETARY OF STATE USE ONLY

including any accompanying schedule	l affirm that I have examined this report, s and statements, and that all statements
contained herein are true and correct.	
Rom (ut.	2/10/09
Signature	Date
Brian W. Curtis	
Print or Type Name	
President	