

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615

401.222.3040

2009

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00

penalty see of \$25.00.						
1. Corporate ID No. 135032	2. Name of Corporation Burrillville Fire Alarm, Inc.					
3. State of Incorporation RHODE ISLAND	4. Corporate address in RL 115 Central	oode island - Street Address Street		Gity Harrisville	^{Zip} 02830	
5. Foreign corporation. Enter principal office address			City	State	Ziţ)	
6. RESPONSIBLE FOR THE INSTALLATION, OPERATION AND MAINTENANCE OF THE RADIO FIRE ALARM SIGNALING SYSTEM WITHIN THE TOWN OF BURRILLVILLE AND DISTRICT OF Harrisville, Pascoag, 7. Nakland Manlayiller and Marcinyille pox for attachment) [FILL IN SPACES BEFORE USING ATTACHMENTS						
Donald C. Mehrtens			Vice President Name Kevin J. Carter			
Street 1 Railroad Avenue			Street Address Laurel Hill Avenue			
Harrisville	State RI	^{Zip} 02830	Pascoag	State RI	^{Хір} 02859	
Secretary Name Augustine Eddy			Treasure: Name Mark A. St. Pierre			
Street Address			Street Address Maple Drive			
Gity Harrisville 8. NAMES AND ADDRESSES	RI OF THE DIRECTOR	ziφ 02830 s: ("x" box for attac i	_{Cny} Harrisville HMENT)∏ FILL IN SPACES BI	State RI BFORE USING ATTACH	zip 02830 ments	
			ORPORATION SHALL NOT B			
Director Name Donald C. Mehrtens			Director Name Kevin J. Carter			
Street Address 71 Railroad Avenue			Street Address 125 Laurel Hill Avenue			
^{City} Harrisville	State RI	02830	Pascoag	State RI	02859	
Director Name Augustine Eddy			Director Name Mark A. St. Pierre			
Street Address 803 Douglas Pike			Street Address 130 Maple Drive			
Harrisville 9. REGISTERED AGENT IN I	RI RHODE ISLAND	<i>z</i>	Cay Harrisville	State RI	02830	
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.1.G.L. 7-6-13/7-6-78						

This report must be signed by either the President, Vice President. Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date	5-13-09		
Check No.	159		
Ву:	mnc		
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.

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Signature of Officer

Donald C. Mehrtens

Print or Type Name of Officer

Chairman

Title of Officer