

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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 jee of \$25.00.	_						
1. Corporate ID No.	2. Name of Con	2. Name of Corporation					
27777	BRISTOLIT	BRISTOLITE FOUNDATION					
3. State of Incorporation	4. Corporate ad	4. Corporate address in Rhode Island - Street Address City Zip					
RHODE ISLAND	One Park f	One Park Row, Suite 300, Attn: Nathan W. Chace, Esq.			02903		
5. Foreign corporation. Enter principal office address			City	State	Zip		
6. Brief Description of the che	aracter of the affairs whit	ch are actually conducted in R	bode Island	<u> </u>			
Charitable contribution	ns						
7. NAMES AND ADDR	ESSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT)	S BEFORE USING ATTA	CHMENTS		
President Name			Vice President Name				
Nathan W. Chace, A	Assistant Secreta	ry					
Street Address			Street Address				
One Park Row, Suite	e 300						
City	State	Zip	City	State	Zip		
Providence	RI	02903					
Secretary Name			Treasurer Name				
Joan D. Martin			Edward L. Wrobel				
Street Address			Street Address	Street Address			
324 North Lane			680 Warren Avenue				
City	State	Zip	City	State	Zip		
Bristol	RI	02809	East Providence	RI	02914		
8. NAMES AND ADDR	ESSES OF THE DIE	RECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SPACE	ES BEFORE USING ATT.	ACHMENTS		
THE NUMBER OF DII	RECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL NO	OT BE LESS THAN THE	REE (3). R.I.G.L. 7-6-23		
Director Name			Director Name	Director Name			
Joan D. Martin			Edward L. Wrobel	Edward L. Wrobel			
Street Address			Street Address				
324 North Lane			680 Warren Avenue				
City	State	Zip	City	State	Zip		
Bristol	RI	02809	East Providence	RI	02914		
Director Name			Director Name				
Elaine Shaw			Nathan W. Chace				
Street Address			Street Address		****		
59 Campbell Street			One Park Row, Suite 300				
City	State	Zip	City	State	Zip		
Pawtucket	RI	02860	Providence	RI	02903		
9. REGISTERED AGEN	T IN RHODE ISLA	ND		•	•		
This information is asset	contly of rayand in the	o Office of the Secretary	of State Change manine Filing of	E (41 DICL 7.4.)	12/7 / 70		
		ie Office of the Secretary (of State. Changes require filing of	rom 041 - K.I.G.L. /-6-1	3/ /-0-/8		
This report	t must be signed by	either the President, Vic	ee President, Secretary, Assistant	Secretary, Treasurer, Re	ceiver or Trustee		

File Date	FILED				
Check No.	JUN 2 6 2009				
Ву:	BV 1008				
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.

Joan D	matin	6/24/0
Signature of Officer		Date

Joan D. Martin
Print or Type Name of Officer

Chairman & Secretary

Title of Officer