



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

Fee: \$20.00

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

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.

**ANNUAL REPORT YEAR:** 2009

**1. Corporate ID No.** 000136058

**2. Name of Corporation** ALLIED BEVERAGE COUNCIL

**3. State of Incorporation**

State:

**4. Corporate Address in Rhode Island**

No. and Street: 5 BLOUNT CIRCLE

City or Town: BARRINGTON State: RI Zip: 02806 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO PROMOTE THE GENERAL WELFARE, PROGRESS AND DEVELOPMENT OF THE ALCOHOLIC BEVERAGE INDUSTRY

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	AMOS SHEPARD	5 BLOUNT CIRCLE BARRINGTON, RI 02806 USA
DIRECTOR	FRANK BOTELHO	ST. ANDREWS CT. PALM SPRINGS, FL 32137 USA
DIRECTOR	CHARLES FRADIN	121 HOPKINS HILL RD. WEST GREENWICH, FL 02817 USA
DIRECTOR	BRIAN GOLDMAN	66 WYNDHAM AVE. PROVIDENCE, RI 02908 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

AMOS SHEPARD 5 BLOUNT CIRCLE BARRINGTON , RI 02806-

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

**Signed this 21 Day of July, 2009 at 2:22:24 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By AMOS SHEPARD  
Signature of Officer of the Corporation

President or  Vice President or  Secretary or  Assistant Secretary or  
 Treasurer or  Receiver or  Trustee (check one)

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.**

Form No. 631  
Revised 09/07

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