



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

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 2010

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. 2895		2. Name of Corporation Bri-Way, Inc.		
3. Street Address Principal Business Office 530 Smithfield Avenue			City Pawtucket	State RI
4. Business Phone No. 401-723-2042		5. State of Incorporation RI		
6. Brief Description of the Character of Business Conducted in Rhode Island Real Estate				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Charlene E. Williams		Vice President Name Angell L. Williams		
Street Address 530 Smithfield Avenue		Street Address 530 Smithfield Avenue		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI
Secretary Name Merrick R. Williams		Treasurer Name Charlene E. Williams		
Street Address 530 Smithfield Avenue		Street Address 530 Smithfield Avenue		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Charlene E. Williams		Director Name		
Street Address 530 Smithfield Avenue		Street Address		
City Pawtucket	State RI	Zip 02860	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED 1,000 No Par Value		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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	None	None

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.

File Date 1-04-2010
Check No. 1615
By: MRC
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.

Charlene E. Williams Jan. 1, 2010
Signature Date
Charlene E. Williams
Print or Type Name
President
Title