



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 02904-2631
401.222.3034

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. 76189	2. Name of Corporation BC VIP Services, Inc.
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3. Street Address Principal Business Office 153 Riverside Drive	City Wakefield	State RI	Zip 02879
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4. Business Phone No. (401) 789-8119	5. State of Incorporation Rhode Island
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6. Brief Description of the Character of Business Conducted in Rhode Island
The Compiling of and Packaging of Various Voice Information and Programming Services for Distribution to Service Providers.

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Donald Coyne	Vice President Name Margaret Coyne
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Street Address 153 Riverside Drive	Street Address 153 Riverside Drive
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City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
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Secretary Name Donald Coyne	Treasurer Name Donald Coyne
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Street Address 153 Riverside Drive	Street Address 153 Riverside Drive
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City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
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8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Donald Coyne	Director Name None
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Street Address 153 Riverside Drive	Street Address
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City Wakefield	State RI	Zip 02879	City	State	Zip
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Director Name None	Director Name None
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Street Address	Street Address
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City	State	Zip	City	State	Zip
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9. SHARES AUTHORIZED **10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

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
	100	Common	No Par

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.

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.

Signature: Donald Coyne Date: 2-17-10
Print or Type Name: Donald Coyne
Title: President

File Date: 2/26/2010
Check No.: 6695
By: KMc
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