



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 2008

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. 000163356		2. Name of Corporation Bruno Independent Living Aids, Inc.			
3. Street Address Principal Business Office 1780 Executive Drive			City Oconomowoc	State WI	Zip 53066
4. Business Phone No. (262) 953-5433		5. State of Incorporation Wisconsin			
6. Brief Description of the Character of Business Conducted in Rhode Island Sales of mobility and accessibility devices.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael R. Bruno, II			Vice President Name Thomas Jacobsen		
Street Address 1780 Executive Drive			Street Address 1780 Executive Drive		
City Oconomowoc	State WI	Zip 53066	City Oconomowoc	State WI	Zip 53066
Secretary Name Jay Schroeter			Treasurer Name Michael R. Bruno, II		
Street Address 1780 Executive Drive			Street Address 1780 Executive Drive		
City Oconomowoc	State WI	Zip 53066	City Oconomowoc	State WI	Zip 53066
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael R. Bruno, II			Director Name Beverly A. Bruno		
Street Address 1780 Executive Drive			Street Address 1780 Executive Drive		
City Oconomowoc	State WI	Zip 53066	City Oconomowoc	State WI	Zip 53066
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS		
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 2,800	Class/Series CNP	Par Value \$0.00

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.

FILED
JUL 25 2011

By Jay Schroeter

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.

Jay W Schroeter 2/7/11
Signature Date

Jay Schroeter
Print or Type Name

Vice President Finance
Title

File Date _____
Check No. _____
By: _____
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