



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 - FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>15939</u>		2. Exact name of the Corporation <u>Kitson's Liquors Inc.</u>			
3. Principal office address <u>677 Putnam Pike PO Box 888</u>			City <u>Chepachet</u>	State <u>RI</u>	Zip <u>02814</u>
4. Business Phone No. <u>515-2222</u>		5. State of Incorporation <u>Rhode Island</u>			
6. Brief description of the character of business conducted in Rhode Island <u>To engage in the business operation + management of a retail liquor store</u>					
President Name <u>Lisa Kitson</u>			Vice-President Name <u>Lisa Kitson</u>		
Street Address <u>673 Putnam Pike</u>			Street Address <u>673 Putnam Pike</u>		
City <u>Chepachet</u>	State <u>RI</u>	Zip <u>02814</u>	City <u>Chepachet</u>	State <u>RI</u>	Zip <u>02814</u>
Secretary Name <u>Lisa Kitson</u>			Treasurer Name <u>Lisa Kitson</u>		
Street Address <u>673 Putnam Pike</u>			Street Address <u>673 Putnam Pike</u>		
City <u>Chepachet</u>	State <u>RI</u>	Zip <u>02814</u>	City <u>Chepachet</u>	State <u>RI</u>	Zip <u>02814</u>
Director Name <u>None</u>			Director Name <u>None</u>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name <u>None</u>			Director Name <u>None</u>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.			NUMBER OF SHARES <u>200-</u>	CLASS/SERIES <u>Common</u>	PAR VALUE <u>No Par Value</u>

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.

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 2012 FEB 28 AM 10:30
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 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.

Lisa M. Kitson 2/2/12
 Signature of Authorized Representative Date

Lisa M. Kitson, President
 Print or Type Name of Authorized Representative