



**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

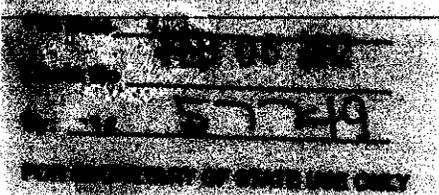
Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

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>740</u>		2. Exact name of the Corporation <u>Christy's Liquors Inc</u>		
3. Principal office address <u>1184 Main Street PO Box 800</u>		City <u>Chepachet</u>	State <u>RI</u>	Zip <u>02814</u>
4. Business Phone No. <u>565-1111</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 &amp; management of a retail liquor store.</u>				
President Name <u>Kevin J. Kitson</u>		Vice-President Name <u>Kevin J. 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>
Secretary Name <u>Kevin J. Kitson</u>		Treasurer Name <u>Kevin J. 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>
Director Name <u>None</u>		Director Name <u>None</u>		
Street Address		Street Address		
City	State	Zip	City	State
Director Name <u>None</u>		Director Name <u>None</u>		
Street Address		Street Address		
City	State	Zip	City	State
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>100 -</u>	CLASS/SERIES <u>Common</u>	PAR VALUE <u>No Par Value</u>

This report must be filed 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**



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.

Kevin J. Kitson 2-2-2012  
 Signature of Authorized Representative Date

Kevin J. Kitson  
 Print or Type Name of Authorized Representative