

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

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PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

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

. Entity ID No.							
82998	Bristoi	ristol Harbor Group, Inc.					
. Principal office addres 99 Poppasquash	s Road Unit H		City Bristol	State RI	Zip 02809		
Business Phone No. 101) 253-4318		5. State of Incorporation Rhode Island					
. Brief description of the	character of busines	conducted in Rhode Islan	nd		· · · · · · · · · · · · · · · · · · ·		
Providing naval d environments and	esign services, i i industry	ncluding the design	of products to be	used in marine			
LIST AL POPFICERS	(NAMES AND ADDE	ESSES) ("X" BOX FOR A	TTACHMENT)	Waste William	19.56 JV		
esident Name Gregory W. Beers			Vice-President Name Cory C. Wood				
reet Address 99 Poppasquash	Road Unit H		Street Address 99 Poppasquash Road Unit H				
ity Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809		
ecretary Name Cory C. Wood			Treasurer Name Gregory W. Beers				
reet Address 99 Poppasquash I	et Address Poppasquash Road Unit H		Street Address 99 Poppasquash Road Unit H				
ty Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809		
LIST ALL DIRECTOR	S (NAMES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)				
regory W. Beers			Director Name Andrew T. Tyska				
eet Address 9 Poppasquash F	Road Unit H		Street Address 99 Poppasquas	sh Road Unit H	· · · · · · · · · · · · · · · · · · ·		
y Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809		
ector Name Ory C. Wood			Director Name				
eet Address 9 Poppasquash Road Unit H		Street Address					
y Bristol	State RI	Zip 02809	City	State	Zip		
SHARES AUTHORIZE	P. S.		10. SHARES ISSUE	("X" BOX FOR ATTAC	IMENTO		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE		
information is currently of record in the Office of the Secretary tate. Changes require an additional filing. Section 9 of instruction sheet.		120	Common	No par value			
is report must be exec	uted on behalf of the o	corporation by an authorize	od representative. If the				

WARE TWY 1			
File Date		Under penalty of perjury, I declare and affirm the this report, including any accompanying schedulard that all statements contained.	les and statements
Check No	FILED	and that all statements contained herein are true	and correct.
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		\sim \sim \sim	1/03/2013
By:		Cionatura et A. III	1/20/0010
	JAN 2 4 2013	Signature of Authorised Representative	(Date
FOR SECRETARY OF STATE USE ONLY	3544 2 1 2010	Cory C. Wood	
. A. SCATICONSTITUTION STATE OSE ONLY	/	Cory C. Wood	
Form No. 630	SELL	Print or Type Name of Authorized Representative	
	1.50 11	Time of type manie of Authorized Representative	
Revised: 01/2012	The state of the s		