



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 2014

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. 145766		2. Exact name of the Corporation BUTCHER BLOCK MEATS, LTD						
3. Principal office address 35 Timberland Drive		City Lincoln	State RI	Zip 02865-0000				
4. Business Phone No.		5. State of Incorporation RI						
6. Brief description of the character of business conducted in Rhode Island to operate a supermarket business								
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT) ☐								
President Name Mark G. Brigido			Vice-President Name none					
Street Address 35 Timberland Drive			Street Address none					
City Lincoln	State RI	Zip 02865-	City none	State none	Zip none			
Secretary Name Mark G. Brigido			Treasurer Name Mark G. Brigido					
Street Address 35 Timberland Drive			Street Address 35 Timberland Drive					
City Lincoln	State RI	Zip 02865-	City Lincoln	State RI	Zip 02865-			
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT) ☐								
Director Name Mark G. Brigido			Director Name Bruce J. Brigido					
Street Address 35 Timberland Drive			Street Address 35 Timberland Drive					
City Lincoln	State RI	Zip 02865-	City Lincoln	State RI	Zip 02865-			
Director Name Lee Ann Brigido			Director Name none					
Street Address 35 Timberland Drive			Street Address none					
City Lincoln	State RI	Zip 02865-	City none	State none	Zip none			
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.								
						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.

File Date: _____
Check No: _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED

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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.

Mark G. Brigido 1/06/2014
Signature of Authorized Representative Date
Mark G. Brigido
Print or Type Name of Authorized Representative
President