



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **111300** 2. Name of Corporation **BREWERS WHOLESAL SUPPLY, INC.**

3. Street Address Principal Business Office **312 Connell Highway** City **Newport** State **RI** Zip **02840**
4. Business Phone No. **800-816-8246** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2659**

7. Brief Description of the Character of Business Conducted in Rhode Island
sales and distribution of brewing supplies

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name J. William Crisp Street Address 32 Ayrault Street City Newport , RI 02840 Secretary Name Gertrude-Mercer Crisp Street Address 32 Ayrault Street City Newport , RI 02840	Vice President Name Gertrude Mercer Crisp Street Address 32 Ayrault Street City Newport , RI 02840 Treasurer Name Gertrude-Mercer Crisp Street Address 32 Ayrault Street City Newport , RI 02840
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9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name J. William Crisp Street Address 32 Ayrault Street City Newport , RI 02840	Director Name Gertrude-Mercer Crisp Street Address 32 Ayrault Street City Newport , RI 02840
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10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
3,000 NO PAR VALUE		

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
2,000	common	0

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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File Date: 2/1/02
Check No.: 7529
By: [Signature]

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.
Signature of Officer: [Signature] Date: 25 JUN 02

J. William Crisp
Print or Type Name of Officer
President
Title of Officer