

State of Rhode Island and Providence Plantations  
 Office of The Secretary of State  
 100 North Main Street  
 Providence, Rhode Island 02903-1335  
 401-277-3040



**ANNUAL REPORT**

Please Type or Print  
 File Annually - Jan. 1 - March 1  
 Filing Fee \$50.00  
 Make Checks Payable to: Secretary of State

**ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.**

Corporate ID: 0072100 Annual Report for the year: 1995  
 Name of Corporation: The Newport Brewing Company

Business entity organized under the laws of the State of: RI Business Entity is (check one):  
 For foreign entity, address and telephone number of principal office:  Business Corporation (See RIGL Chapter 7-1.1)  
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ( )  
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):  
31 America's Cup Avenue  
Newport, RI 02840  
 Phone: ( 401 ) 847-0872

Brief statement of the character of business conducted in Rhode Island:  
to own, operate, invest, manage, lease and develop real estate and restaurants

**THE NAMES OF THE OFFICERS ARE:**

RESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
	<u>Brian J. Foley, c/o Health Care Assoc</u>	<u>70 Avon Meadow Lane, Avon, CT</u>	<u>06001</u>
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
	<u>same</u>		
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
	<u>same</u>		
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
	<u>same</u>		

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
	<u>Brian J. Foley, c/o Health Care Assoc</u>	<u>70 Avon Meadow Lane, Avon, CT</u>	<u>06001</u>
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
<u>4000</u>	<u>common no par value</u>	<u>100</u>	<u>common</u>

Date March 1, 1995

By: Brian J. Foley  
 PRINT OR TYPE NAME OF OFFICER SIGNING  
 TITLE OF OFFICER SIGNING President

**DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:**

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

PATRICK O'N. HAYES, JR.  
 31 AMERICA'S CUP AVENUE  
 NEWPORT RI 02840

MAILED  
 MAR 8 1995  
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