



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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FILED
SECRETARY OF STATE
CORPORATIONS DIV

Profit Corporation Annual Report for the year: 2016

Filing period: January 1 - March 1

2016 JUL -5 AM 9:05

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number 000016009		2. Exact name of the Corporation Haxton Toll Gate Liquor, Inc.					
3. Principal Office Address 1123 Bald Hill Road		City Warwick	State RI	Zip 02886			
4. Business Phone Number 4018283000		5. State of Incorporation RI					
6. Brief description of the character of business conducted in Rhode Island Retail Liquor Store							
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>							
President Name Robert J. Haxton		Vice-President Name Timothy P. Haxton					
Street Address 483 Bittersweet Farm Way		Street Address 58 Grande Brook Circle					
City Wakefield	State RI	Zip 02879	City South Kingstown	State RI	Zip 02879		
Secretary Name Robert J. Haxton		Treasurer Name Timothy P. Haxton					
Street Address 483 Bittersweet Farm Way		Street Address 58 Grande Brook Circle					
City Wakefield	State RI	Zip 02879	City South Kingstown	State RI	Zip 02879		
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>							
Director Name		Director Name					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
9. Shares Authorized					10. Shares Issued Check box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.					NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
					100		0.00
11. 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. <i>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.</i>							
Name of Authorized Representative Robert J. Haxton					Date 6/26/16		
Signature of Authorized Representative <i>Robert J. Haxton</i> SIGN DOCUMENT HERE							

FILED

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