



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

**Annual Report for the year: 2017**  
**Corporation**

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

**FILED**  
 JAN 20 2017  
 BY 11785

|   |                   |   |   |                    |                     |
|---|-------------------|---|---|--------------------|---------------------|
| 1. Entity ID Number<br><b>70874</b>   |                   | 2. Exact name of the Corporation<br><b>The Bristol Workshops in Photography, Ltd.</b>   |   |                    |                     |
| 3. Principal Office Address<br><b>446A Thames Street</b>  |                   |   | City<br><b>Bristol</b>  | State<br><b>RI</b> | Zip<br><b>02809</b> |
| 4. NAICS Code<br><b>71 - Arts, Entertainment, and Re</b>  |                   | 6. Brief description of the character of business conducted in Rhode Island<br><b>Photographic services and art-related services.</b> |   |                    |                     |
| 5. State of Incorporation<br><b>Rhode Island</b>  |                   |   |   |                    |                     |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                   |   |   |                    |                     |
| President Name <b>Stephan H. Brigidi</b>  |                   |   | Vice-President Name <b>Julia E. Brigidi</b>   |                    |                     |
| Street Address <b>446A Thames Street</b>  |                   |   | Street Address <b>446A Thames Street</b>  |                    |                     |
| City <b>Bristol</b>   | State <b>RI</b>   | Zip <b>02809</b>  | City <b>Bristol</b>   | State <b>RI</b>    | Zip <b>02809</b>    |
| Secretary Name <b>Stephan H. Brigidi</b>  |                   |   | Treasurer Name <b>Julia E. Brigidi</b>  |                    |                     |
| Street Address <b>446A Thames Street</b>  |                   |   | Street Address <b>446A Thames Street</b>  |                    |                     |
| City <b>Bristol</b>   | State <b>RI</b>   | Zip <b>02809</b>  | City <b>Bristol</b>   | State <b>RI</b>    | Zip <b>02809</b>    |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                   |   |   |                    |                     |
| Director Name <b>Stephan H. Brigidi</b>   |                   |   | Director Name <b>Julia E. Brigidi</b>   |                    |                     |
| Street Address <b>446A Thames Street</b>  |                   |   | Street Address <b>446A Thames Street</b>  |                    |                     |
| City <b>Bristol</b>   | State <b>RI</b>   | Zip <b>02809</b>  | City <b>Bristol</b>   | State <b>RI</b>    | Zip <b>02809</b>    |
| Director Name <b>None</b>   |                   |   | Director Name <b>None</b>   |                    |                     |
| Street Address <b>None</b>  |                   |   | Street Address <b>None</b>  |                    |                     |
| City <b>None</b>  | State <b>None</b> | Zip <b>None</b>   | City <b>None</b>  | State <b>None</b>  | Zip <b>None</b>     |
| 9. Shares Authorized  |                   |   | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                    |                     |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.  |                   |   | NUMBER OF SHARES  | CLASS/SERIES       | PAR VALUE           |
|   |                   |   | <b>100</b>  | <b>N/A</b>         | <b>No Par Value</b> |
| 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. |                   |   |   |                    |                     |
| <b>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.</b>                                       |                   |   |   |                    |                     |
| Name of Authorized Representative<br><b>Stephan H. Brigidi</b>  |                   |   |   |                    | Date                |
| Signature of Authorized Representative<br>  |                   |   |   |                    |                     |

**MAIL TO:**  
 Division of Business Services  
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