



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 137518		2. Name of Corporation United Independent Liquor Retailers Association of Rhode Island, Inc.			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island -Street Address 321 South Main Street		City Providence	Zip 02903
5. Foreign corporation: Enter principal office address		City		State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO PROMOTE AND REPRESENT THE COMMON BUSINESS INTERESTS OF AND IMPROVE BUSINESS CONDITIONS AMONG, MEMBERS OF THE INDEPENDENT RETAIL LIQUOR INDUSTRY					
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Elliott N. Fishbein		Vice President Name Ronald McGreen			
Street Address 179 Newport Avenue		Street Address			
City East Providence	State RI	Zip 02914	City	State	Zip
Secretary Name Jane E. Costanza		Treasurer Name Thomas F. Saccocia			
Street Address 667 Kingstown Road		Street Address 2069 Smith Street			
City Wakefield	State Ri	Zip 02879	City North Providence	State RI	Zip 02911
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Elliott N. Fishbein		Director Name Ronald McGreen			
Street Address 179 Newport Avenue		Street Address			
City East Providence	State RI	Zip 02914	City	State	Zip
Director Name Jane E. Costanza		Director Name Thomas F. Saccocia			
Street Address 667 Kingstown Road		Street Address 2069 Smith Street			
City Wakefield	State RI	Zip 02879	City North Providence	State RI	Zip 02911
9. REGISTERED AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 641 -R.I.G.L. 7-6-13 / 7-6-78					
Agent Name Arthur J. Leonard Esq		Address			
Address 321 South Main Street, Suite 301		City Providence		Zip 02903	

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 APR 27 2006

Check No. 1048

By: EAC

FOR SECRETARY OF STATE USE ONLY

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 Jane E. Costanza Date 4/13/06

Print or Type Name of Officer
Jane E. Costanza

Secretary

Title of Officer