



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 02903-1331
401.222.3046

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 48041		2. Name of Corporation REDBIRD LIQUOR STORE, INC.			
3. Street Address: Principal Business Office P.O. Box 550			City New Shoreham	State RI	Zip 02807
4. Business Phone No. (401) 466-2441		5. State of Incorporation RHODE ISLAND			6. SIC Code 3095
7. Brief Description of the Character of Business Conducted in Rhode Island THE SALE OF ALCOHOL AND MALT BEVERAGES					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Caroline L. Todd			Vice President Name Caroline L. Todd		
Street Address P.O. Box 550			Street Address P.O. Box 550		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
Secretary Name Caroline L. Todd			Treasurer Name Caroline L. Todd		
Street Address P.O. Box 550			Street Address P.O. Box 550		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
2,000 NO PAR VALUE			100	common	NO

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



File Date 1-18-05
Check No. 2092
By: [Signature]
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.

Caroline L. Todd Pres. 1/17/05
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer
President



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 02903-1330
401.222.3044

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1 Corporate ID No. 48041		2 Name of Corporation REDBIRD LIQUOR STORE, INC.		
3 Street Address Principal Business Office P.O. Box 550		City New Shoreham	State RI	Zip 02807
4 Business Phone No. 401-466-2441		5 State of Incorporation RHODE ISLAND		6 SIC Code 3095
7 Brief Description of the Character of Business Conducted in Rhode Island THE SALE OF ALCOHOL AND MALT BEVERAGES				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Caroline L. Todd		Vice President Name Caroline L. Todd		
Street Address P.O. Box 550		Street Address P.O. Box 550		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI
Secretary Name Caroline L. Todd		Treasurer Name Caroline L. Todd		
Street Address P.O. Box 550		Street Address P.O. Box 550		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name None		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
2,000 NO PAR VALUE			100	Common
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series

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



* 4 8 0 4 1 *

File Date **1-29-04**

Check No. **1749**

By: **[Signature]**

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.

Caroline L. Todd, Pres Jan 16, 2004
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer

President



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

Edward S. Inman, III, Secretary of Sta.
Corporations Division
100 North Main Street, Providence, RI 02903-133
401-222-304



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

48041

2. Name of Corporation

REDBIRD LIQUOR STORE, INC.

3. Street Address Principal Business Office

P.O. Box 550

City

State

Zip

New Shoreham

RI

02807

4. Business Phone No.

401-466-2441

5. State of Incorporation

RHODE ISLAND

6. SIC Code

3095

7. Brief Description of the Character of Business Conducted in Rhode Island

The sale of alcohol and malt beverages.

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

President Name

Caroline L. Todd

Street Address

P.O. Box 550

City State Zip
New Shoreham RI 02807

Secretary Name

Caroline L. Todd

Street Address

P.O. Box 550

City State Zip
New Shoreham RI 02807

Vice President Name

Caroline L. Todd

Street Address

P.O. Box 550

City State Zip
New Shoreham RI 02807

Treasurer Name

Caroline L. Todd

Street Address

P.O. Box 550

City State Zip
New Shoreham RI 02807

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

None

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

2,000 NO PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

100 Common No

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



* 4 8 0 4 1 *

File Date: 1-17-03

Check No.: 1395

By: UP

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.

Caroline L. Todd Pres. 1/11/03
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer

President



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3046

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. **48041**
2. Name of Corporation **REDBIRD LIQUOR STORE, INC.**
3. Street Address Principal Business Office
P.O. Box 550
4. Business Phone No. **(401) 466-2441**
5. State of Incorporation **RHODE ISLAND**
7. Brief Description of the Character of Business Conducted in Rhode Island

City **New Shoreham** State **RI** Zip **02807**
6. SIC Code **3095**

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

President Name Caroline L. Todd Street Address P.O. Box 550 City New Shoreham State RI Zip 02807	Vice President Name Caroline L. Todd Street Address P.O. Box 550 City New Shoreham State RI Zip 02807
Secretary Name Caroline L. Todd Street Address P.O. Box 550 City New Shoreham State RI Zip 02807	Treasurer Name Caroline L. Todd Street Address P.O. Box 550 City New Shoreham State RI Zip 02807

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Street Address City State Zip	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
2,000 NO PAR VALUE		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	Common	No

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



* 4 8 0 4 1 *

File Date: 3/13/02

Check No.: 1032

By: 15

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.

Caroline L. Todd 3/11/02
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer



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

Corporations Division
100 North Main Street, Providence, RI 02903-13
401-222-30



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

48041

2. Name of Corporation

REDBIRD LIQUOR STORE, INC.

3. Street Address Principal Business Office

P.O. Box 550

City

New Shoreham

State

RI

Zip

02807

4. Business Phone No.

(401) 466-2441

5. State of Incorporation

RHODE ISLAND

6. SIC Code

3095

7. Brief Description of the Character of Business Conducted in Rhode Island

The sale of alcohol and malt beverages.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Caroline L. Todd

Street Address

P.O. Box 550

City

New Shoreham

State

RI

Zip

02807

Secretary Name

Caroline L. Todd

Street Address

P.O. Box 550

City

New Shoreham

State

RI

Zip

02807

Vice President Name

Caroline L. Todd

Street Address

P.O. Box 550

City

New Shoreham

State

RI

Zip

02807

Treasurer Name

Caroline L. Todd

Street Address

P.O. Box 550

City

New Shoreham

State

RI

Zip

02807

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

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

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

2,000 SHS NO PAR VAL

100

Common

No

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



* 4 8 0 4 1 *

2/9

File Date: 5/8/01

Check No.: 2

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.

Caroline L. Todd, Pres 2/1/01
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-13
401-222-36

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **48041** 2. Name of Corporation **REOBIRD LIQUOR STORE, INC.**

3. Street Address Principal Business Office

P.O. Box 550

City

New Shoreham

State

RI

Zip

02807

4. Business Phone No.

(401) 466-2441

5. State of Incorporation
RHODE ISLAND

6. SIC Code
3095

7. Brief Description of the Character of Business Conducted in Rhode Island

The sale of alcohol and malt beverages.

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

President Name

Caroline L. Todd

Vice President Name

Caroline L. Todd

Street Address

P.O. Box 550

Street Address

P.O. Box 550

City New Shoreham State RI Zip 02807

City Providence State RI Zip 02807

Secretary Name

Caroline L. Todd

Treasurer Name

Caroline L. Todd

Street Address

P.O. Box 550

Street Address

P.O. Box 550

City New Shoreham State RI Zip 02807 City New Shoreham State RI Zip 02807

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

Director Name

Street Address

Street Address

City State Zip City State Zip

Director Name

Director Name

Street Address

Street Address

City State Zip City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value
2,000 SHS NO PAR VAL

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

ISSUED SHARES

Number of Shares Class/Series Par Value
100 Common No

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



* 4 8 0 4 1 *

File Date: PAID

Check No.: JAN 21 2000

By: SEC'Y OF STATE

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.

Caroline L. Todd Jan 14, 2000
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer
President



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1331
401-222-3041

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 48041		2. Name of Corporation REDBIRD LIQUOR STORE, INC.	
3. Street Address Principal Business Office P.O. Box 550		City New Shoreham	State RI
4. Business Phone No. (401) 466-2441		Zip 02807	6. SIC Code 3095
5. State of Incorporation RHODE ISLAND			
7. Brief Description of the Character of Business Conducted in Rhode Island The sale of alcohol and malt beverages.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Caroline L. Todd		Vice President Name Caroline L. Todd	
Street Address P.O. Box 550		Street Address P.O. Box 550	
City New Shoreham	State RI	City New Shoreham	State RI
Zip 02807		Zip 02807	
Secretary Name Caroline L. Todd		Treasurer Name Caroline L. Todd	
Street Address P.O. Box 550		Street Address P.O. Box 550	
City New Shoreham	State RI	City New Shoreham	State RI
Zip 02807		Zip 02807	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
2,000 SHS NO PAR VAL		100	Common
Par Value		Par Value	

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



* 4 8 0 4 1 *

File Date: Feb 22, 99

Check No.: 2487

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.

Caroline L. Todd
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1333
401-277-3046

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

1998



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

3. Street Principal Business Office REDBIRD LIQUOR STORE, INC.

City

State

Zip

P. O. Box 338 SSO

New Shoreham

RI

02807

4. Business Phone No.

5. State of Incorporation

6. SIC Code

(401) 466-2441

7. Brief Description of the Character of Business Conducted in Rhode Island RHODE ISLAND

3095

The sale of alcohol and malt beverages.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Vice President Name

Caroline L. Todd

Caroline L. Todd

Street Address

Street Address

P. O. Box 338 SSO

P. O. Box 338 SSO

City

State

Zip

New Shoreham RI

02807

City

State

Zip

New Shoreham

RI

02807

Secretary Name

Treasurer Name

Caroline L. Todd

Caroline L. Todd

Street Address

Street Address

P. O. Box 338 SSO

P. O. Box 338 SSO

City

State

Zip

New Shoreham RI

02807

City

State

Zip

New Shoreham

RI

02807

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

100

common

2,000 SHS NO PAR VAL

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



File Date: 3-6-98

Check No.: 2024

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.

Caroline L. Todd, Pres. 2/17/98
Signature of Officer Date

Caroline L. Todd
Print or Type Name of Officer

President



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1331
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 48041		2. Name of Corporation REDBIRD LIQUOR STORE, INC.			
3. Street Address Principal Business Office P. O. Box 338		City New Shoreham	State RI	Zip 02807	
4. Business Phone No. (401) 466-2441		5. State of Incorporation RHODE ISLAND		6. SIC Code 3095	
7. Brief Description of the Character of Business Conducted in Rhode Island The sale of alcohol and malt beverages.					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)					
President Name Caroline L. Todd		Vice President Name Caroline L. Todd			
Street Address P. O. Box 338		Street Address P. O. Box 338			
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
Secretary Name Caroline L. Todd		Treasurer Name Caroline L. Todd			
Street Address P. O. Box 338		Street Address P. O. Box 338			
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)					
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
2,000 SHS NO PAR VAL			100	common	no

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



File Date: 7/16/97
Check No.: 1707
By: Car

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: Caroline L. Todd Date: 7/24/97
Print or Type Name of Officer: Caroline L. Todd

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3046

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 48041		2. NAME OF CORPORATION REDBIRD LIQUOR STORE, INC.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE P. O. Box 338			CITY Block Island	STATE RI	ZIP CODE 02807
4. BUSINESS PHONE NO. (401) 466-2441		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 3095
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND The sale of alcohol and malt beverages.					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Caroline L. Todd			VICE PRESIDENT NAME Caroline L. Todd		
STREET ADDRESS P. O. Box 338			STREET ADDRESS P. O. Box 338		
CITY Block Island	STATE RI	ZIP CODE 02807	CITY Block Island	STATE RI	ZIP CODE 02807
SECRETARY NAME Caroline L. Todd			TREASURER NAME Caroline L. Todd		
STREET ADDRESS P. O. Box 338			STREET ADDRESS P. O. Box 338		
CITY Block Island	STATE RI	ZIP CODE 02807	CITY Block Island	STATE RI	ZIP CODE 02807
9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
2,000 SHS NO PAR VAL	common		100	common	no par

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date:

2/8/96

Check No:

1035

By:

(CS) / W

Signature of Officer


Caroline L. Todd

Caroline L. Todd

Print or Type Name of Officer

President

1/31/96

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: 0048041 Annual Report for the year: 1995

Name of Corporation: REDBIRD LIQUOR STORE, INC.

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office:

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

Brief statement of the character of business conducted in Rhode Island:
the sale of alcohol and malt beverages

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

Dodge Street

Block Island, Rhode Island 02807

Phone: (401) 466-2441

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Caroline L. Todd</u>	<u>P. O. Box 338</u>	<u>Block Island, RI</u>	<u>02807</u>
VICE-PRESIDENT <u>Caroline L. Todd</u>	<u>P. O. Box 338</u>	<u>Block Island, RI</u>	<u>02807</u>
SECRETARY <u>Caroline L. Todd</u>	<u>P. O. Box 338</u>	<u>Block Island, RI</u>	<u>02807</u>
TREASURER <u>Caroline L. Todd</u>	<u>P. O. Box 338</u>	<u>Block Island, RI</u>	<u>02807</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
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	Class / Series
<u>2000</u>	<u>common no par</u>

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
<u>100</u>	<u>common no par</u>

Date RD 3/1 1995

By: Caroline L. Todd, Pres.

Caroline L. Todd

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Form 31 1-95

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.

RICHARD JESSUP, JR.
116 ORANGE ST.
PROVIDENCE RI 02903

FILED
MAR 29 1995
By AC 905

Filing Fee \$50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT
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

File Annually
LLC Sept 1 - Nov 1
CORP Jan 1 - March 1

Corporate ID: 0048041 Annual Report for the year: 1994

Name of Business Entity: REDEIRD LIQUOR STORE, INC.

Business entity organized under the laws of the State of: Rhode Island Business Entity is (check one)

Federal Taxpayer Identification Number: [REDACTED] ☒ Business Corporation (See RIGL Chapter 7-1.1)

For foreign entity, address and telephone number of principal office: ☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Richard Jessup, Jr., Esquire

116 Orange Street

Providence, RI 02903

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

Redbird Liquor Store, Inc.

~~Main Street~~ Dodge Street

Block Island, RI 02807

Phone: 401, 466-2441

Brief statement of the character of business conducted in Rhode Island:

the sale of alcohol and malt beverages.

Date of Organization: August 18, 1988

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

☒ President: Caroline L. Todd P.O. Box 338 Block Island, RI 02807

☒ Secretary: Caroline L. Todd P.O. Box 338 Block Island, RI 02807

☒ Treasurer: Caroline L. Todd P.O. Box 338 Block Island, RI 02807

☒ Director: Caroline L. Todd P.O. Box 338 Block Island, RI 02807

THE NAMES OF THE DIRECTORS ARE:

None

NUMBER OF SHARES AUTHORIZED (if Applicable):

NUMBER: 2000

CLASS: common

SERIES:

WITHOUT PAR

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable):

NUMBER: 100

CLASS: common

SERIES:

WITHOUT PAR

DATE: January 24, 1994

BY: Caroline L. Todd, Pres.

CAROLINE L. TODD

PRESIDENT

TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

RICHARD JESSUP, JR.

116 ORANGE ST

PROVIDENCE RI 02903

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

221 KC

Corporate ID 0048041 Annual Report for the year 1993

FIRST: The name of the corporation is REDBIRD LIQUOR STORE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is the sale of alcohol and malt beverages.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Richard Jessup, Jr., Esquire

116 Orange Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Caroline L. Todd

President

P.O. Box 338, Block Island, RI

Caroline L. Todd

Vice President

P.O. Box 338, Block Island, RI

Caroline L. Todd

Secretary

P.O. Box 338, Block Island, RI

Caroline L. Todd

Treasurer

P.O. Box 338, Block Island, RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

2,000

common

F...J

no par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

common

no par value

Dated April 23 1993.

REDBIRD LIQUOR STORE, INC.

(Name of Corporation)

By Caroline L. Todd - Pres.

President

Title

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

SM # 519A

Corporate ID 0048041 Annual Report for the year 1992

FIRST: The name of the corporation is REDBIRD LIQUOR STORE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is the sale of alcohol and malt beverages

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island c/o Richard Jessup, Jr., Esq., 116 Orange Street, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Caroline L. Todd	President	P.O. Box ³³⁸ 577 , Block Island, RI
Caroline L. Todd	Vice President	P.O. Box ³³⁸ 577 , Block Island, RI
Caroline L. Todd	Secretary	P.O. Box ³³⁸ 577 , Block Island, RI
Caroline L. Todd	Treasurer	P.O. Box ³³⁸ 577 , Block Island, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class
2,000	common

PAID

MAR 02 1992

Par Value
or statement that
shares are without
par value

no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
2,000	common

SECY OF STATE

Par Value
or statement that
shares are without
par value

no par value

Dated Feb 26 19 92

REDBIRD LIQUOR STORE, INC.
(Name of Corporation)

By Caroline L. Todd

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0048041 *ff* Annual Report for the year 1991

FIRST: The name of the corporation is REDBIRD LIQUOR STORE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is the sale of alcohol and malt beverages and any other lawful purpose

FOURTH: If foreign corporation, address of its principal office. n/a

FIFTH: Business address in Rhode Island
c/o Richard Jessup, Jr., Esq., 116 Orange Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Caroline L. Todd	President	P.O. Box 577, Block Island, RI
Caroline L. Todd	Vice President	P.O. Box 577, Block Island, RI
Caroline L. Todd	Secretary	P.O. Box 577, Block Island, RI
Caroline L. Todd	Treasurer	P.O. Box 577, Block Island, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
2,000	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
2,000	common		no par value

Dated Mar 4 19 91

REDBIRD LIQUOR STORE, INC.

(Name of Corporation)

By Caroline L. Todd
President

Title

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

AT

Corporate ID 0048041

Annual Report for the year 1990

FIRST: The name of the corporation is REDBIRD LIQUOR STORE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is the sale of alcohol and malt beverages
and for any other lawful purpose

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island c/o Richard Jessup, Jr., Esq.
116 Orange Street, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Caroline L. Todd President P.O. Box 577, New Shoreham, RI

Caroline L. Todd Vice President P.O. Box 577, New Shoreham, RI

Caroline L. Todd Secretary P.O. Box 577, New Shoreham, RI

Caroline L. Todd Treasurer P.O. Box 577, New Shoreham, RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

2,000

common

Rec'd & Filed

MAY 03 1990

no par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

2,000

common

no par value

Dated January 2 19 90

REDBIRD LIQUOR STORE, INC.

(Name of Corporation)

By

Caroline L. Todd

(Report must be signed by an officer)

Title PRESIDENT

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 0048041 Annual Report for the year 1988FIRST: The name of the corporation is REDBIRD LIQUOR STORE, INC.SECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is sale of alcohol and malt beverages and
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116 Orange Street, Providence, Rhode Island 02903

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	Director	
	Director	
	Director	
Caroline L. Todd	President	P. O. Box 577, New Shoreham, RI
Caroline L. Todd	Vice President	P. O. Box 577, New Shoreham, RI
Caroline L. Todd	Secretary	P. O. Box 577, New Shoreham, RI
Caroline L. Todd	Treasurer	P. O. Box 577, New Shoreham, RI

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2,000	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	common		no par value

Dated May 1 19 89REDBIRD LIQUOR STORE, INC.
(Name of Corporation)By Caroline L. ToddTitle President

(Report must be signed by an officer)