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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

## FILED

FEB 2 2 2021

Annual Report for the year: 2021

Corporation

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

| Entity ID Number   | 2. Exact name of the Corporation |                      |  |                       |                |                            |  |
|--|----------------------------------|----------------------|--|-----------------------|----------------|----------------------------|--|
| 150982   | Edgewood Liquors, Inc.           |                      |  |                       |                |                            |  |
| 3 Principal Office Address   |                                  |                      | lCity  |                       | State          | Zip                        |  |
| 1551 Centreville Road  |                                  |                      | Warwick  |                       | RI             | 02886                      |  |
| 4. NAICS Code  | 6. Brief descr                   | iption of the charac | ter of business c                                      | onducted in Rhode     | Island         | 1                          |  |
| 445310   | Retail liquo                     | Retail liquors sales |  |                       |                |                            |  |
| 5. State of Incorporation  | 7                                |                      |  |                       |                |                            |  |
| RI   |                                  |                      |  |                       |                |                            |  |
| 7. List ALL officers (names and a                                      | odresses)                        |                      |  |                       | k the box to i | ndicate an attachment 🗀    |  |
| President Name Geoffrey E. Rousselle                                   |                                  |                      | Vice-President Name<br>Roger H. Rousselle              |                       |                |                            |  |
| Street Address 79 Lenox Avenue   |                                  |                      | Street Address 40 Archer Street                        |                       |                |                            |  |
| City West Warwick  | State RI                         | <sup>Z p</sup> 02893 | City Bellingham  |                       | State MA       | Z <sup>-p</sup> 02019      |  |
| Secretary Name Geoffrey E. Rousselle                                   |                                  |                      | Treasurer Name<br>Geoffrey E. Rousselle                |                       |                |                            |  |
| Street Acdress 79 Lenox Avenue   |                                  |                      | Street Address 79 Lenox Avenue                         |                       |                |                            |  |
| City<br>West Warwick   | State RI                         | <sup>Zıp</sup> 02893 | City West W  | arwick                | State RI       | <sup>Zıp</sup> 02893       |  |
| 8. List ALL directors (names and                                       | addresses)                       | <del></del>          |  | Ched                  | k the box to i | ndicate an attachment 🔲    |  |
| Director Name<br>Geoffrey E. Rousselle                                 |                                  |                      | Director Name<br>Roger H. Rousselle                    |                       |                |                            |  |
| Street Acdress 79 Lenox Avenue   |                                  |                      | Street Address 40 Archer Street                        |                       |                |                            |  |
| City<br>West Warwick   | State RI 🗡                       | <sup>710</sup> 02893 | C ty<br>Bellingham                                     |                       | State MA       | 7 <sup>Ip</sup> 02019      |  |
| Director Name<br>Andrea J. Rousselle                                   |                                  |                      | Director Name  |                       |                |                            |  |
| Street Address 79 Lenox Avenue   |                                  |                      | Street Address   |                       |                |                            |  |
| City West Warwick  | State                            | 7.p<br>02893         | City   |                       | State          | 7 <sub>1</sub> p           |  |
|  | S.ate RI                         | 02893                | <u> </u>   |                       |                |                            |  |
|  |                                  |                      | O Shares Issued Check the box to indicate an attachmen |                       |                |                            |  |
| This information is currently of record in the<br>Department of State. |                                  | NUMBER OF SHARES     |  | CLASS-SER ES          |                | PAR VALUE                  |  |
| Changes require an additional filing.                                  |                                  | 200                  |  | Common                |                | No par value               |  |
|  |                                  |                      |  |                       |                |                            |  |
| 11. This report must be executed trustee, this report must be exec     | i on behalf of the               | corporation by an    | authorized repres                                      | sentative. If the cor | poration is in | the hands of a receiver or |  |
| Under penalty of perjury, I dec  |                                  |                      |  |                       | ompanying s    | chedules and               |  |
| statements, and that all staten  | nents contained                  | l herein are true ai | nd correct.  |                       | 1              |                            |  |
|  |                                  | ;                    |  |                       | Date           | •                          |  |
| Name of Authorized Represental<br>Geoffrey E. Rousselle                |                                  |                      |  |                       | 2/19           | - 21                       |  |

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.r.gov