



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 8751		2. Name of Corporation SARGEANT & WILBUR, INC.			
3. Street Address Principal Business Office 20 Monticello Place			City Pawtucket	State RI	Zip 02862
4. Business Phone No. (401) 726-0013		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURING, PURCHASING, SELLING AND DEALING IN INDUSTRIAL HEAT TREATING EQUIPMENT OF ALL KINDS AND ALL ALLIED ACCESSORIES AND APPLIANCES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael F. Wilbur			Vice President Name Marcia J. Wilbur		
Street Address 336 Wayland Avenue			Street Address 336 Wayland Avenue		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Raymond J. McMahon			Treasurer Name Mary Alice Wilbur		
Street Address 76 Westminster Street			Street Address 336 Wayland Avenue		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02906
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael F. Wilbur			Director Name Raymond J. McMahon		
Street Address 336 Wayland Avenue			Street Address 76 Westminster Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02903
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 COMM NO PAR VALUE			100	Common	No par value

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.

8751	
File Date	FILED
Check No.	JAN 10 2008
By:	14091
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: Raymond J. McMahon Date: 1/7/08
Print or Type Name: Raymond J. McMahon
Title: Secretary