

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 2007

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 falling 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))						
1. Corporate ID No. 131613	2. Name of Corporation PELLETIER'S BUILDING SUPPLY COMPANY, INC.					
3. Street Address Principal Business Office 133 WATER STREET			City FITCHBURG	State MA	Zip 01420	
4. Business Phone No. 978-345-2541			5. State of Incorporation MASSACHUSETTS			
6. Brief Description of the Character	of Business Conducted	in Rhode Island				
7. NAMES AND ADDRESSES President Name DAVID M. PELLETIER	S OF THE OFFICEI	RS: ("X" BOX FOR A	TTACHMENT) [] FILL IN S Vice President Name JAMES R. VEZINA	PACES BEFORE USING	ATTACHMENTS	
Street Address 246 CHACE HILL ROAD			Street Address 28 WOODLAND DRIVE			
City LANCASTER	State MA	Հեր 01523	City LUNENBURG	State MA	_{Хір} 01462	
Secretary Name DAVID M. PELLETIER			Treasurer Name DAVID M. PELLETIER			
Street Address 246 CHACE HILL ROAD			Street Address 246 CHACE HILL ROAD			
City LANCASTER	State MA	^{Zip} 01523	City LANCASTER	State MA	^{Zip} 01523	
8. NAMES AND ADDRESSES Director Name DAVID M. PELLETIER	OF THE DIRECTO	ORS: ("X" BOX FOR	ATTACHMENT) FILL IN Director Name	SPACES BEFORE USING	ATTACHMENTS	
Street Address 246 CHACE HILL ROAD)		Street Address			
City LANCASTER	State MA	<i>Ζι</i> ρ 0 1523	Сиу	State	Zip	
Director Name JAMES R. VEZINA			Director Name			
Street Address 28 WOODLAND DRIVE			Street Address			
City LUNENBURG	State MA	^{Zip} 01462	Сиу	State	Zip	
9. SHARES AUTHORIZED (AUTHORIZED SHARES	"X" BOX FOR ATT	ACHMENT) 🗌		("X" BOX FOR ATTACH TION MUST BE COMPLETED	MENT) [
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
5,000 NO PAR VALUE	COMMON	NONE	3,079	соммон	NO PAR	
-	on behalf of the co	orporation by an autho	orized representative. If the co	orporation is in the hands	of a receiver or trustee,	

	FILED
File Date	
	MAR 1 1 2008
Check No.	
Bv	/220/
Ву:	
F	OR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and aff including any accompanying schedules an	
contained heldin are trace and correct.	3/5/08
Signature	Date /
DAVID M. PELLETIER	
Print or Type Name	-
PRESIDENT	
Tista	