



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 2009

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. 14169		2. Name of Corporation STEEER EXCAVATING CO. INC.			
3. Street Address Principal Business Office 1304 PUTNAM PIKE			City CHEPACHET	State R.I.	Zip 02814
4. Business Phone No. 401-568-8678		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island EXCAVATING, SAND + GRAVEL					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WALTER STEERE			Vice President Name MARTHA STEERE		
Street Address 1318 PUTNAM PIKE			Street Address 1318 PUTNAM PIKE		
City CHEPACHET	State R.I.	Zip 02814	City CHEPACHET	State R.I.	Zip 02814
Secretary Name MARTHA STEERE			Treasurer Name MARTHA STEERE		
Street Address 1318 PUTNAM PIKE			Street Address 1318 PUTNAM PIKE		
City CHEPACHET	State R.I.	Zip 02814	City CHEPACHET	State R.I.	Zip 02814
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 500			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 500	Class/Series	Par Value NO-PAR

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.

File Date	1-5-09
Check No.	5632
By:	MNC
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	Walter Steere	Date	1-1-09
WALTER STEERE			
PRESIDENT			
Title			