



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. 141776		2. Name of Corporation MUNTERS CORPORATION			
3. Street Address Principal Business Office 79 MONROE STREET, P.O. BOX 640			City AMESBURY	State MA	Zip 01913
4. Business Phone No. 978-241-1143		5. State of Incorporation NEW YORK			
6. Brief Description of the Character of Business Conducted in Rhode Island SALES/LEASE/SVC OF ENVIRONMENTAL CONTROL PRODUCTS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MICHAEL MCDONALD			Vice President Name GARY POTAVIN		
Street Address 79 MONROE ST			Street Address 79 MONROE ST		
City AMESBURY	State MA	Zip 01913	City AMESBURY	State MA	Zip 01913
Secretary Name GARY POTAVIN			Treasurer Name GARY POTAVIN		
Street Address 79 MONROE ST			Street Address 79 MONROE ST		
City AMESBURY	State MA	Zip 01913	City AMESBURY	State MA	Zip 01913
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name MICHAEL MCDONALD			Director Name GARY POTAVIN		
Street Address 79 MONROE ST			Street Address 79 MONROE ST		
City AMESBURY	State MA	Zip 01913	City AMESBURY	State MA	Zip 01913
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 1000			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 1000	Class/Series COMMON	Par Value 0.10
			SECTION 10.11		

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	1-12-09
Check No.	115901
By:	MMC
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: Gary Potavin Date: 1-7-09
Print or Type Name: Gary Potavin
Title: VP/Secretary/Treasurer