



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St.
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. 71615		2. Name of Corporation Richmond Diesel & Tire Co., Inc.			
3. Street Address Principal Business Office 530 Nooseneck Hill Road			City Exeter	State RI	Zip 02822
4. Business Phone No. 401-397-6360		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island truck repair, service and sales					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gregory F. Jarvis			Vice President Name Gregory F. Jarvis		
Street Address 530 Nooseneck Hill Road			Street Address 530 Nooseneck Hill Road		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
Secretary Name Gregory E. Jarvis			Treasurer Name Gregory F. Jarvis		
Street Address 530 Nooseneck Hill Road			Street Address 530 Nooseneck Hill Road		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name N/a			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
-600-	common	no par value	-200-	common	no par value
			THIS SECTION MUST BE COMPLETED		

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	FILED
Check No.	JAN 12 2009
By:	By 177915
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
Gregory F. Jarvis

Date
1-7-09

Print or Type Name
President

Title