

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(e&d)) is

subject to a penalty fee of \$25.00	0.					
1. Corporate ID No. 97176	2. Name of Cor Pond View	2. Name of Corporation Pond View Recycling, Inc.				
3. Street Address Principal Business Office 1 Dexter Road			East Providence	State RI	Zip 02914	
4. Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief Description of the Chard To operate a roll-off bus		icted in Rhode Island th the collection of debris and	to operate a facility that p	processes constructio	n and demolition debris.	
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA- President Name Kenneth J. Foley			CHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS   Vice President Name   Kenneth J. Foley			
Street Address 1 Dexter Road			Street Address 1 Dexter Road			
City East Providence	State <b>RI</b>	<i>Ζίρ</i> 02914	City East Providence	State RI	<sup>Zip</sup> 02914	
Secretary Name Linda K. Foley			Treasurer Name Kenneth J. Foley			
Street Address 1 Dexter Road			Street Address 1 Dexter Road			
Cuy East Providence	State RI	<sup>Zip</sup> 02914	City East Providence	State RI	7/p 02914	
8. NAMES AND ADDRES  Director Name  Kenneth J. Foley	SES OF THE DIR	ECTORS: ("X" BOX FOR ATT	TACHMENT)  FILL IN S Director Name Linda K. Foley	SPACES BEFORE USI	NG ATTACHMENTS	
Street Address  1 Dexter Road			Street Address 1 Dexter Road			
City	State	Zip	City	State	Zip	
East Providence	RI	02914	East Providence	RI	02914	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZE	D;	I	in 10. SHARES ISSUED (			
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.			Number of Shares	Class/Series	Par Value	
			100		No Par	
			t gelik kecili	HELD CALLED TO THE OT		
•		he corporation by an authorize	-	poration is in the han	ds of a receiver or trustee,	

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements
File Date 24/2-09	contained herein are true and correct.
Check No	Signature Date  Kennetli J. Foley
FOR SECRETARY OF STATE USE ONLY	Print or Type Name Pres
FOR SECRETARY OF STATE USE ONLY	Title