



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. 131343		2. Name of Corporation GRANITE STORAGE, INC.			
3. Street Address Principal Business Office 101 Cross Street Ext.			City Westerly	State RI	Zip 02891
4. Business Phone No. 401-596-3955		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island generally engage in the business of a storage facility					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert Cruso			Vice President Name Francis Gencarelli		
Street Address 101 Cross Street Ext.			Street Address 101 Cross Street Ext.		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name Robert Cruso			Treasurer Name Francis Gencarelli		
Street Address 101 Cross Street Ext.			Street Address 101 Cross Street Ext.		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert Cruso			Director Name Francis Gencarelli		
Street Address 101 Cross Street Ext.			Street Address 101 Cross Street Ext.		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES -- THIS SECTION MUST BE COMPLETED					
Number of Shares		Class/Series		Par Value	
1,000		common		no par	
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.					

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	2-19-09
Check No.	2119
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: Date: 2/17/09
Robert Cruso
Print or Type Name
President
Title