

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

401.222.304

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.

618 Greenville Road Business Phone No. State of Incorporation Richard State Properties Richard Richard	3. Street Address Principal B	usiness Office	<u> </u>	City	State	Zip
### Address Application State S	618 Greenville Road			N. Smithfield		
Producer of sand, gravel, stone, processed gravel 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Treatment Name Nichael T. Pezza Street Address 10 Leonard Drive Treatment Name Michael T. Pezza Street Address 10 Leonard Drive Treatment Name Constance M. Pezza Street Address 11 Winsor Avenue Treatment Name This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of State. Changes require an additional filing. See Section 9 of States of State	5. Share by Intemporation				•	
Vice President Name	6. Brief Description of the Ch Producer of sand, gra	aracter of Business Condu	cted in Rhode Island ed gravel			
Michael T. Pezza Michael T. Pezza	. NAMES AND ADDR	ESSES OF THE OFF	ICERS: ("X" BOX FOR ATTA		SPACES BEFORE USING	ATTACHMENTS
Street Address 19 Factory Pond circle 10 Leonard Drive 11 Leonard Drive 11 Leonard Drive 12 Leonard Drive 13 Leonard Drive 13 Leonard Drive 14 Leon	President Name			•		
City Greenville RI 02828	Street Address			<u>• </u>		
Greenville RI 02828 Harrisville RI 02830 Secretary Name Constance M. Pezza Secretary Name Constance M. Pezza Street Address 11 Winsor Avenue City Johnston RI 02919 S. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) Director Name Street Address			7/0	•		
Constance M. Pezza Street Address 11 Winsor Avenue State Ri D2919 Johnston Ri D2919 State Address 11 Winsor Avenue State Ri D2919 Johnston Ri D2919 State D2919 State D2919 Johnston Ri D2919 State D2919 Johnston Ri D2919 Johns	Greenville					^{Zip} 02830
11 Winsor Avenue State Ztp O2919		а			a	
Johnston RI 02919 Johnston RI 02919 Dynston RI 02919 B. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Street Address Street Address Director Name Director Name Street Address Street Address Street Address Street Address This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 6000 COMMON.	Street Address 11 Winsor Aveue			_		
Street Address Street Address Street Address City State Zip Director Name Director Name Director Name Director Name Street Address Street Address Street Address Street Address Street Address This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of State. Changes require an additional filing. See Section 9 of Coo.	Johnston	RI	02919	Johnston	RI	02919
Street Address Street Address City State Zip City State Zip Director Name Street Address Street Address City State Zip City State Zip O. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 600 Common Report Value	3. NAMES AND ADDR Director Name	ESSES OF THE DIRI	ECTORS: ("X" BOX FOR ATT		SPACES BEFORE USIN	G ATTACHMENTS
City State Zip City State Zip Director Name Street Address Street Address City State Zip City State Zip O. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 600 Common Polynomy				- Com Canal		
Director Name Director Name Street Address Street Address O. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 600 Common Road Zap	Street Address			Street Address		
Street Address Street Address Street Address City State Zip O. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 600 Common Reservol	City	State	Zip	City	State	Zip
City State Zip City State Zip 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 600 Common Reservoil	Oirector Name	J		Director Name		.,
State Zip City State Zip State Zip 9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) SISSUED SHARES — THIS SECTION MUST BE COMPLETED This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 600 Common Report Value	Stroot Address			Ŷ		
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 600 Common	The factor con			Street Address		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of State.	City	State	Zip	City	State	Zip
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Par Value 600 COMMON). SHARES AUTHORIZ	ED	I	10. SHARES ISSUED	("X" BOX FOR ATTAC	 HMENT) ∏
State. Changes require an additional filing. See Section 9 of 600 common no partial				ISSUED SHARES — THIS SEC		
	This information is cur State. Changes require	rently of record in the	ne Office of the Secretary of			
		an additional tilling	. See Section 9 of	600	common	no par value
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 this report must be executed on behalf of the corporation by the receiver or trustee.	This report must be ex-	ecuted on behalf of the	ne corporation by an authorize	ed representative. If the c	orporation is in the hand	s of a receiver or trus
				Under penalty of p	erjury, I declare and affirm	that I have examined this
Under penalty of periury. I declare and affirm that I have examined	· 			including any acco	mpanying schedules and st	atements, and that all sta
Under penalty of perjury, I declare and affirm that I have examined including any accompanying scheduler and statements, and that all	File Date	_		contained herein a	re true and correct	1 21-10
including any accompanying scheduler and statements, and that al				Signature	158 1 12	- ×/ /9/ 6
including any accompanying scheduler and statements, and that al contained herein are true and correct. File Date 1			1	5. \. 5	_	
including any accompanying scheduler and statements, and that al contained herein are true and correct. File Date Signature Signature Signature	Check No FFR 9. 0 7	009		Robert A. Pe	ezza	
including any accompanying scheduler and statements, and that al contained herein are true and correct File Date Signature Signature Date	FEB 2 0 2	009				-