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	2. Name of Corporation
134898	C.A.P. TRANSPORTATION CORPORATION

3. Street Address Principal Business Office	City	State	Zip
CAROL ANNE PINELLE	EXETER	RHODE ISLAND	02822

4. Business Phone No	5. State of Incorporation
401-295=5224	RHODE ISLAND

6. Brief Description of the Character of Business Conducted in Rhode Island
TRUCKING AND TRANSPORTATION OF STONE GRAVEL DEMO

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
CAROL A. PINELLE	CAROL A. PINELLE
Street Address: 35 DOLLY POND ROAD	Street Address: 35 DOLLY POND ROAD
City: EXETER · State: R. I. · Zip: 02822	City: EXETER · State: R. I. · Zip: 02822
Secretary Name: CAROL A. PINELLE	Treasurer Name: CAROL A. PINELLE
Street Address: 35 DOLLY POND ROAD	Street Address: 35 DOLLY POND ROAD
City: EXETER · State: R. I. · Zip: 02822	City: EXETER · State: R. I. · Zip: 02822

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Director Name
CAROL A. PINELLE	
Street Address: 35 DOLLY POND ROAD	Street Address:
City: EXETER · State: R. I. · Zip: 02822	City: · State: · Zip:
Director Name:	Director Name:
Street Address:	Street Address:
City: · State: · Zip:	City: · State: · Zip:

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class Series	Par Value
1500		$0.01

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.

[redacted] [redacted]

FILED

File Date FEB 25 2009

Check No. By 1508

By:

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.

Carol Anne Pinelle 2/20/2009

Signature *Date*

CAROL ANNE PINELLE
Print or Type Name

[redacted]

PRESIDENT
Title

Form 630 Rev. 08/08