



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 02904-2613  
(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)(3)(d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>66404</b>		2. Name of Corporation <b>G. HILL PLUMBING AND HEATING, INC.</b>			
3. Street Address Principal Business Office <b>15 Pond Street</b>					City <b>Westerly</b>
4. Business Phone No. <b>(401) 596-0356</b>		5. State of Incorporation <b>RHODE ISLAND</b>		State <b>RI</b>	Zip <b>02891</b>
6. Brief Description of the Character of Business Conducted in Rhode Island <b>TO PROVIDE COMMERCIAL AND RESIDENTIAL PLUMBING, HEATING AND FIRE PROTECTION SERVICES.</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Gregory S. Hill</b>			Vice President Name <b>None</b>		
Street Address <b>15 Pond Street</b>			Street Address		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City	State	Zip
Secretary Name <b>George T. Hill, Jr.</b>			Treasurer Name <b>Gregory S. Hill</b>		
Street Address <b>15 Pond Street</b>			Street Address <b>15 Pond Street</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>None</b>			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					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares <b>100 Shares</b>		Class/Series <b>Common</b>		Par Value <b>No Par Value</b>	
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.

**FILED**

File Date **FEB 26 2009**

Check No. \_\_\_\_\_

By: **By 7988**

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.

**Gregory S. Hill Pres. 2/26/09**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Gregory S. Hill**

Print or Type Name \_\_\_\_\_

**President**

Title \_\_\_\_\_