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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			
10850	GILL SERVICES, INC.			
3. Street Address Principal Business Office		City	State	Zip
1177 Jefferson Boulevard		Warwick	RI	02886
4. Business Phone No.	5. State of Incorporation			
401-295-7455	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island
REPLACE AND INSTALL #2 HEATING OIL TANKS (RESIDENTIAL AND COMMERCIAL)

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

President Name			Vice President Name		
PAUL A. GILL			ROBERT R. IACONO		
Street Address			Street Address		
198 SHIPPEE COVE ROAD			63 BRAMBLE LANE		
City	State	Zip	City	State	Zip
COVENTRY	RI	02893	WEST WARWICK	RI	02893
Secretary Name			Treasurer Name		
NONE			MARY T. IACONO		
Street Address			Street Address		
			63 BRAMBLE LANE		
City	State	Zip	City	State	Zip
			WEST WARWICK	RI	02893

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

Director Name			Director Name		
PAUL A. GILL			ROBERT R. IACONO		
Street Address			Street Address		
198 SHIPPEE COVE ROAD			63 BRAMBLE LANE		
City	State	Zip	City	State	Zip
COVENTRY	RI	02893	WEST WARWICK	RI	02893
Director Name			Director Name		
MARY T. IACONO					
Street Address			Street Address		
63 BRAMBLE LANE					
City	State	Zip	City	State	Zip
WEST WARWICK	RI	02893			

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
40	COMMON	NO PAR

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]

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.

Paul Gill — 2/26/09
Signature — *Date*

PAUL A. GILL
Print or Type Name

PRESIDENT
Title

[redacted]

FILED
File Date
Check No. MAR 03 2009
By: By JKH
FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 08/08

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