

A. Ralph Mollis, Secretary of Stat Corporations Divisio: 148 W. River Stree Providence, RI 02904-261. 401.222.304

## 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. Name of Corporation 82950 Septic Snooper, Inc. 3. Street Address Principal Business Office 23 Arnold Street *City* Wakefield State RI 02879 1. Business Phone No 5. State of Incorporation 401-783-7700 Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island Installation, Inspection, Design, Repair, Maintenance & Consulting concerning OWTS & Sewage Disposal and treatment facilities 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Corrine H. Frisella Joseph W. Frisella Street Address Street Address 23 Arnold Street 23 Amold Street City Wakefield State RI 02879 Wakefield RI 02879 Secretary Name Treasurer Name Street Address Street Address City City State 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Street Address Street Address City State Zib $Cit_1$ State Zip Director Name Director Name Street Address Street Address

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.

City

500

Number of Shares

File Date	FILED	
Check No.	MAR 0.5 2009	
Ву:	By 1201	
	FOR SECRETARY OF STATE USE ONLY	

State

State. Changes require an additional filing. See Section 9 of

This information is currently of record in the Office of the Secretary of

Zip

City

9. SHARES AUTHORIZED

instruction sheet.

Under penalty of perjury, I declare an including any accompanying schedule contained herein are true and correct.  Agraeus Viscolary Vis	d affirm that I have examined this reported and statements, and that all statement 2-25-09  Date
Title	
	Form 630 Rev. 08/08

State

Class/Series

STK

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

issued shares — this section <u>must</u> be completed

Ζip

Par Value

0.00