



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 02904-2601
(401) 222-3000

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. 64002
2. Name of Corporation Peterson Corporation

3. Street Address Principal Business Office 405 New Meadow Road
City Barrington State RI Zip 02806

4. Business Phone No. 401-245-6679
5. State of Incorporation RI

6. Brief Description of the Character of Business Conducted in Rhode Island
Consulting, design and tool repair

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

President Name Herbert Peterson
Vice President Name David Peterson

Street Address 405 New Meadow Rd., Barrington RI 02806
Street Address 405 New Meadow Road

City Barrington State RI Zip 02806
City Barrington State RI Zip 02806

Secretary Name Herbert Peterson
Treasurer Name Herbert Peterson

Street Address see above
Street Address see above

City State Zip
City State Zip

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

Director Name
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

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
300	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.

File Date **FILED**
Check No. **APR 09 2009**
By **623594 62361**
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.

Signature **Herbert Peterson** Date **3-31-09**

Herbert Peterson

Print or Type Name

president

Title