

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009 9 Filing Period: June 1 - June 30 • Filing Fee: \$20.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

401.222.3040

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a

penaity jee of \$25.00.						
1. Corporate ID No.	2. Name of Corp	oration				
37513	OIL SAVER	OIL SAVERS GROUP				
3. State of Incorporation	4. Corporate ad	dress in Rhode Island - Street A	Address	City	Zip	
Rhode ISLAND	6 Hi View [6 Hi View Drive			02831	
5. Foreign corporation. Enter principal office address			City	State	Zip	
6. Brief Description of the cha	racter of the affairs whic	ch are actually conducted in Rh	oode Island			
HEATING OIL BUYING	G GROUP					
7. NAMES AND ADDRI	ESSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) 🗍 FILL IN SP.	ACES BEFORE USING AT	TTACHMENTS	
President Name			Vice President Name			
William J. Riccitelli			Lorraine Sidelinger			
Street Address			Street Address			
6 Hi View Drive		1	37 Acres of Pine	,	Lus	
City	State	Zip	City	State	Zip 0004€	
Hope	RI	02831	Coventry	RI	02816	
Secretary Name			Treasurer Name Lorraine Sidelinger			
Lorraine Sidelinger				31		
Street Address	a d		Street Address 37 Acres of Pine Road			
37 Acres of Pine Ro	· · · · · · · · · · · · · · · · · · ·	773	City	State	Zip	
City	State	Zip	•			
Coventry	RI	02816	Coventry ATTACHMENT) ☐ FILL IN SI	RI	02816	
			· · · · · · · · · · · · · · · · · · ·			
	ECTORS OF A DO	MESTIC (KHODE ISLA	ND) CORPORATION SHAL Director Name	<u>L NOI BE LESS INAN I</u>	<u> </u>	
Director Name						
William J. Riccitelli			Lorraine Sidelinger			
Street Address			Street Address			
6 Hi View Drive		I	37 Acres of Pine		Zip	
City	State	Zip	City	State	02816	
Hope	RI	02831	Coventry	RI	102010	
Director Name			Director Name			
Audrey Croce			Charact Coldinary	·		
Street Address			Street Address			
9 Soprano Circle	0	926	City	State	Zip	
City	State	Ζip 02020	Сиу	Suite	r.eh.	
Cranston 9. REGISTERED AGEN	RI t in rhode isla	02920 .nd	1	ı	i	
This information is curre	ently of record in th	ne Office of the Secretary	of State. Changes require filing	g of Form 641 - R.I.G.L. 7	-6-13/7-6-78	
This report	must be signed by	either the President, Vic	ce President, Secretary, Assis	stant Secretary, Treasurer,	Receiver or Trustee	

File Date	LED
Check No.	02 2009
{By:} By	110612
FOR SE	CRETARY OF STATE USE ONLY

37513

Under penalty of perjury, I declare and report, including any accompanying sch	
statements contained herein are true and	
Signature of Officer	Date
William J. Riccitelli	
Print or Type Name of Officer	
President	
Title of Officer	Form 631 Rev. 09/17