



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. <u>113736</u>		2. Name of Corporation Enfield Enterprises, Inc	
3. Street Address Principal Business Office 30 Magaziner Place		City Springfield	State MA
		Zip 01104	
4. Business Phone No. 413-788-2688		5. State of Incorporation CT	
6. Brief Description of the Character of Business Conducted in Rhode Island General contractor			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Daniel Eastman		Vice President Name	
Street Address 40 Hallie Lane		Street Address	
City Somers	State CT	Zip 06071	
Secretary Name Daniel Eastman		Treasurer Name Barbara Eastman	
Street Address 40 Hallie Lane		Street Address 32 Post Road	
City Somers	State CT	Zip 06071	City Enfield
		State CT	
		Zip 06082	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Daniel Eastman		Director Name	
Street Address 40 Hallie Lane		Street Address	
City Somers	State CT	Zip 06071	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
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.		ISSUED SHARES — THIS SECTION MUST BE COMPLETED	
		Number of Shares	Class/Series
		Par Value	
		10000	Common
			no par value

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.

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: [Signature] Date: 8/20/09
 Daniel Eastman
 Print or Type Name
 President
 Title

FILED
 File Date: SEP 04 2009
 Check No.: _____
 By: 65247 65310
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