

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **63020** 2. Name of Corporation **GREENMAN-PEDERSEN, INC.**

3. Street Address Principal Business Office **325 W. Main St.** City **Babylon** State **NY** Zip **11702**

4. Business Phone No. **(631) 587-5060** 5. State of Incorporation **NEW YORK** 6. SIC Code **7518**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Engineering**

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

President Name **Steven Greenman**  
Street Address **325 W. Main St.**  
City **Babylon** State **NY** Zip **11702**

Vice President Name  
Street Address  
City State Zip

Secretary Name **Michael J. Buoncore**  
Street Address **325 W. Main St.**  
City **Babylon** State **NY** Zip **11702**

Treasurer Name **Michael J. Buoncore**  
Street Address **325 W. Main St.**  
City **Babylon** State **NY** Zip **11702**

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

Director Name **Steven Greenman**  
Street Address **325 W. Main St.**  
City **Babylon** State **NY** Zip **11702**

Director Name **Beecher Greenman**  
Street Address **325 W. Main St.**  
City **Babylon** State **NY** Zip **11702**

Director Name **Michael J. Buoncore**  
Street Address **325 W. Main St.**  
City **Babylon** State **NY** Zip **11702**

Director Name  
Street Address  
City State Zip

**10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**30,000 COMM NO PAR VALUE**

**11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**11,167.03 COMM No Par Value**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 3 0 2 0 \*

File Date: **3-10-03**

Check No.: **3004854**

By: **[Signature]**

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]** **3/5/03**  
Signature of Officer Date

**Michael J. Buoncore**  
Print or Type Name of Officer

**CEO**  
Title of Officer