



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 2011

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. 000073952		2. Name of Corporation VALLEY FUEL, INC.			
3. Street Address Principal Business Office 1343 MAIN STREET		City WEST WARWICK		State RI	Zip 02896
4. Business Phone No. 401-823-8113		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island PURCHASE & SALE OF FUEL OIL; INSTALLATION, REPAIR AND REPLACEMENT BURNERS AND FURNACES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name KATHLEEN J ZAMPA			Vice President Name KATHLEEN J ZAMPA		
Street Address 90 TANGLEWOOD DRIVE			Street Address		
City WEST WARWICK	State RI	Zip 02893	City	State	Zip
Secretary Name KATHLEEN J ZAMPA			Treasurer Name KATHLEEN J ZAMPA		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name KATHLEEN J ZAMPA			Director Name		
Street Address 90 TANGLEWOOD DRIVE			Street Address		
City WEST WARWICK	State RI	Zip 02893	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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
			500 AUTHORIZED	COMMON	NPV
			500 ISSUED	COMMON	NPV

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.

FILED	
File Date	FEB 02 2011
Check No.	By <u>MJC</u>
By:	6805
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.

Kathleen J Zampa Jan 31 2011
Signature Date
KATHLEEN J ZAMPA
Print or Type Name
PRESIDENT
Title