



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
148 W. River St.
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*

* 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. 82046		2. Name of Corporation LACHAPELLE OIL & HEATING CO.			
3. Street Address Principal Business Office 5 Louise Ann Drive			City Esmond	State RI	Zip 02917
4. Business Phone No. 231-0289		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island for the operation of an oil and heating service company					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Wayne Lachapelle			Vice President Name None		
Street Address 129 Farnum Pike			Street Address		
City Smithfield	State RI	Zip 02917	City	State	Zip
Secretary Name Michelle Jackvony			Treasurer Name Wayne Lachapelle		
Street Address 4 Louise Ann Drive			Street Address 129 Farnum Pike		
City Smithfield	State RI	Zip 02917	City Smithfield	State RI	Zip 02917
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Wayne Lachapelle			Director Name Edward Lachapelle		
Street Address 129 Farnum Pike			Street Address 716 Nate Whipple Highway		
City Smithfield	State RI	Zip 02917	City Cumberland	State RI	Zip 02864
Director Name Charles Lachapelle			Director Name		
Street Address 5 Louise Ann Drive			Street Address		
City Smithfield	State RI	Zip 02917	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000	common	\$1.00	100	common	\$1.00

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 25 2011

Check No. _____

By: BY 10429

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.

Wayne Lachapelle 1/6/11

Signature Date

Wayne Lachapelle

Print or Type Name

President

Title