



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. 22517		2. Name of Corporation Concord Oil of Newport, Inc.			
3. Street Address Principal Business Office 147 Lowell Road			City Concord	State MA	Zip 01742
4. Business Phone No. 978-369-3333		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island Retail and wholesale distribution of petroleum products.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael T. Whaley			Vice President Name Douglas A. Bethke		
Street Address 800 Concord Street			Street Address 14 Paul Revere Road		
City Carlisle	State MA	Zip 01741	City Acton	State MA	Zip 01720
Secretary Name Virginia A. Bethke			Treasurer Name Douglas A. Bethke		
Street Address 105 Musterfield Road			Street Address 14 Paul Revere Road		
City Concord	State MA	Zip 01742	City Acton	State MA	Zip 01720
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael T. Whaley			Director Name Douglas A. Bethke		
Street Address 800 Concord Street			Street Address 14 Paul Revere Road		
City Carlisle	State MA	Zip 01741	City Acton	State MA	Zip 01720
Director Name Virginia A. Bethke			Director Name —		
Street Address 105 Musterfield Road			Street Address —		
City Concord	State MA	Zip 01741	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 12,500.00	Class/Series CNP	Par Value 0	
			THIS SECTION MUST BE COMPLETED		

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: **JAN 23 2012**

Check No. **161261 10:53**

By: **[Signature]**

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.

**[Signature]** Date: **1/20/12**

Signature: **Michael Whaley**

Print or Type Name: **Michael Whaley**

Title: **President**