



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE

1. Entity ID No. 000746402		2. Exact name of the Corporation Garner Environmental Services, Inc.			
3. Principal office address 1717 W. 13th Street		City Deer Park	State TX	Zip 77536	
4. Business Phone No. 281 930 1200		5. State of Incorporation TEXAS			
6. Brief description of the character of business conducted in Rhode Island EMERGENCY RESPONSE					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Lyndal D. Garner			Vice-President Name Neal R. Overstreet		
Street Address 1717 W. 13th Street			Street Address 1717 W. 13th Street		
City Deer Park	State TX	Zip 77536	City Deer Park	State TX	Zip 77536
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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.					
		NUMBER OF SHARES 50,000	CLASS/SERIES COMMON	PAR VALUE \$0.10	

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.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

APR 23 2014

BY CR 222 839

10:57

Under penalty of perjury, 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 of Authorized Representative

Lyndal D. Garner

Print or Type Name of Authorized Representative

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SECRETARY OF STATE
CORPORATIONS DIV
2014 APR - 7 AM 11:57

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2014 OCT 25 AM 9:20

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2014 MAR 27 AM 11:15

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