



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 2016

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. 869985		2. Exact name of the Corporation Ocean State Energy Audits, Inc.						
3. Principal office address 210 Riverside Drive		City Riverside	State RI	Zip 02915				
4. Business Phone No. 401-527-4822		5. State of Incorporation Rhode Island						
6. Brief description of the character of business conducted in Rhode Island Energy Audits								
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐								
President Name Kenneth Twitchell			Vice-President Name Melanie Twitchell					
Street Address 210 Riverside Drive			Street Address 210 Riverside Drive					
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915			
Secretary Name Melanie Twitchell			Treasurer Name Kenneth Twitchell					
Street Address 210 Riverside Drive			Street Address 210 Riverside Drive					
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915			
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐								
Director Name Kenneth Twitchell			Director Name Melanie Twitchell					
Street Address 210 Riverside Drive			Street Address 210 Riverside Drive					
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915			
Director Name			Director Name					
Street Address			Street Address					
City	State	Zip	City	State	Zip			
9. SHARES AUTHORIZED						10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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	CLASS/SERIES	PAR VALUE
						100	CWP	\$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.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

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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.

Kenneth Twitchell
Signature of Authorized Representative

12/29/15
Date

Kenneth Twitchell

Print or Type Name of Authorized Representative