

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

3 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.

	· FAILURE TO FI	LE THIS REPORT BY M	ARCH 31 WILL RES	SULT IN A \$25.00 PEN/	ALTY FEE.	
1. Entity ID No. 106888	į	2. Exact name of the Corporation Enviropartners, Inc.				
3. Principal office address 38 Bellevue Avenue, Suite H			City Newport	State RI	Zip 02840	
4. Business Phone No. 401-841-8480			5. State of Incorporation Rhode Island			
•		s conducted in Rhode Island of environmentally		roducts		
7. LIST ALL OFFICERS (NAMES AND ADDR	RESSES) ("X" BOX FOR A	TTACHMENT)			
President Name Gerry A. Callahan			Vice-President Name			
Street Address 38 Bellevue Avenu	e, Suite H		Street Address			
City Newport	State RI	Zip 02840	City	State	Zip	
Secretary Name Steven M. McInnis			Treasurer Name Gerry A. Callahan			
Street Address 38 Bellevue Avenue, Suite H			Street Address 38 Bellevue Avenue, Suite H			
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840	
Director Name Gerry A. Callahan Street Address 38 Bellevue Avenue		PRESSES) ("X" BOX FOR	Director Name Street Address			
City Newport	State RI	Zip 02840	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zìp	
). SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
This information is currently of record in the Office of the Secretary			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
of State. Changes require an additional filing. See Section 9 of instruction sheet.		1,400	Common	\$.01 Par		
This report must be execu	ted on behalf of the this report mu	corporation by an authorize st be executed on behalf of	l d representative. If the the corporation by the t	 corporation is in the hands eceiver or trustee.	s of a receiver or trustee,	
File Date	 	FILED a	this report, includi	erjury, I declare and affir ng any accompanying so ents contained herein,ar	chedules and statements.	
Check No MAR 1 0 2016			Jun. al Gill 3/3/16			
FOR SECRETARY OF STATE USE ONLEY			Signature of Authorized Representative Date Gerry A. Callahan			
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Form No. 630 Revised: 01/2012