



State of Rhode Island and Providence Plantations

**Department of State - Business Services Division****Annual Report for the year: 2017 AMENDED Corporation**

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

*Amended*

1. Entity ID Number <b>44393</b>		2. Exact name of the Corporation <b>Roll-A-Way Disposal, Inc.</b>			
3. Principal Office Address <b>86 Knight Street</b>			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
4. Business Phone Number: <b>401-732-6131</b>		6. Brief description of the character of business conducted in Rhode Island <b>Waste removal, construction and demolition</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Albert Guevremont</b>			Vice-President Name <b>Edward Prosser</b>		
Street Address <b>240 Shawomet Avenue</b>			Street Address <b>303 Gorton Lake Blvd.</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
Secretary Name <b>Lisa V. Prosser</b>			Treasurer Name <b>Albert Guevremont</b>		
Street Address <b>303 Gorton Lake Blvd.</b>			Street Address <b>240 Shawomet Avenue</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Albert Guevremont</b>			Director Name <b>Edward Prosser</b>		
Street Address <b>240 Shawomet Avenue</b>			Street Address <b>303 Gorton Lake Blvd.</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			<b>65</b>	<b>Common</b>	<b>No Par</b>
11. 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. <b>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.</b>					
Name of Authorized Representative <b>Edward Prosser</b>					Date <b>5-12-17</b>
Signature of Authorized Representative <i>[Signature]</i>					

**FILED**

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**MAY 19 2017**BY 42 10:26

FORM 630 - Revised: 08/2016



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

May 19, 2017 10:26 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

