



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 70407		2. Name of Corporation Charland Enterprises, Inc.			
3. Street Address Principal Business Office 168 Benefit Street		City Pawtucket		State RI	Zip 02861
4. Business Phone No. (401) 728-1630		5. State of Incorporation RHODE ISLAND			6. SIC Code 5090
7. Brief Description of the Character of Business Conducted in Rhode Island PLUMBING, HEATING, AIR CONDITIONING, OIL DELIVERY, SALES AND SERVICE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name J. M. Norton			Vice President Name Shawn Norton		
Street Address 28 Francis Ave			Street Address 28 Francis Ave		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Secretary Name Shawn Norton			Treasurer Name J. M. Norton		
Street Address 28 Francis Ave			Street Address 28 Francis Ave		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			1,000 SHS	NO Par Value	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date	4-12-05
Check No.	13473
By:	
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.

3-31-05
Signature of Officer Date
Shawn Marie Norton
Print or Type Name of Officer
Vice President
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 70407		2. Name of Corporation Charland Enterprises, Inc.			
3. Street Address Principal Business Office 168 Benefit Street			City Pawtucket	State RI	Zip 02861
4. Business Phone No. (401) 728-1630		5. State of Incorporation RHODE ISLAND			6. SIC Code 5090
7. Brief Description of the Character of Business Conducted in Rhode Island PLUMBING, HEATING, AIR CONDITIONING, OIL DELIVERY, SALES AND SERVICE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name J. M. Norton			Vice President Name Shawn Norton		
Street Address 28 Francis Ave			Street Address 28 Francis Ave		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Secretary Name Shawn Norton			Treasurer Name J. M. Norton		
Street Address 28 Francis Ave			Street Address 28 Francis Ave		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			1,000	No par	value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 4 0 7 *

FILED

File Date

APR 06 2004

Check No.

By: [Signature] 12956

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.

Shawn Marie Norton 3-31-04
Signature of Officer Date

Shawn Marie Norton
Print or Type Name of Officer

Vice president
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

70407

2. Name of Corporation

Charland Enterprises, Inc.

3. Street Address Principal Business Office

168 Benefit Street

City

Pawtucket

State

RI

Zip

02861

4. Business Phone No.

(401) 728-1630

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5090

7. Brief Description of the Character of Business Conducted in Rhode Island

Full service ; Installation + repairs ; Full Delivery

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

J. M. Norton

Vice President Name

Shawn Norton

Street Address

28 Francis Ave

Street Address

28 Francis Ave

City

Pawtucket

State

RI

Zip

02860

City

Pawtucket

State

RI

Zip

02860

Secretary Name

Shawn Norton

Treasurer Name

J. M. Norton

Street Address

28 Francis Ave

Street Address

28 Francis Ave

City

Pawtucket

State

RI

Zip

02860

City

Pawtucket

State

RI

Zip

02860

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

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

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

1,000 NO PAR VALUE

1,000 SHS No par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 4 0 7 *

File Date:

3-28-03

Check No.:

12320

By:

AMK

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.

Shawn Marie Norton
Signature of Officer

3/24/03
Date

Shawn Marie Norton
Print or Type Name of Officer

Vice President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

70407

2. Name of Corporation

Charland Enterprises, Inc.

3. Street Address Principal Business Office

168 Benefit Street

City

Pawtucket

State

RI

Zip

02861

4. Business Phone No.

(401) 728-1630

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5090

7. Brief Description of the Character of Business Conducted in Rhode Island

Full Service Installation & repairs : Fuel Delivery

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

J. M. Norton

Shawn Norton

Street Address

Street Address

28 Francis Ave

28 Francis Ave

City

City

Pawtucket

State

RI

Zip

02860

City

Pawtucket

State

RI

Zip

02860

Secretary Name

Treasurer Name

Shawn Norton

J. M. Norton

Street Address

Street Address

28 Francis Ave

28 Francis Ave

City

City

Pawtucket

State

RI

Zip

02860

City

Pawtucket

State

RI

Zip

02860

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

1,000 SHS

NO Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 4 0 7 *

File Date:

3-5-02

Check No.:

11580

By:

Shawn Norton

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.

Shawn Marie Norton

Signature of Officer

Date

Shawn Marie Norton

Print or Type Name of Officer

Vice President

Title of Officer

5

Form 630 12/01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 70407 2. Name of Corporation Charland Enterprises, Inc.

3. Street Address Principal Business Office 168 Benefit Street City Pawtucket State RI Zip 02861
4. Business Phone No. (401) 728-1630 5. State of Incorporation RHODE ISLAND 6. 5090

7. Brief Description of the Character of Business Conducted in Rhode Island
Full service, installation & repairs; Fuel Delivery

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>J. m. Norton</u>	Vice President Name <u>Shawn Norton</u>
Street Address <u>28 Francis Ave</u>	Street Address <u>28 Francis Ave</u>
City <u>Pawtucket</u> State <u>RI</u> Zip <u>02860</u>	City <u>Pawtucket</u> State <u>RI</u> Zip <u>02860</u>
Secretary Name <u>Shawn Norton</u>	Treasurer Name <u>J. m. Norton</u>
Street Address <u>28 Francis Ave</u>	Street Address <u>28 Francis Ave</u>
City <u>Pawtucket</u> State <u>RI</u> Zip <u>02860</u>	City <u>Pawtucket</u> State <u>RI</u> Zip <u>02860</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>1,000</u>	<u>NO</u>	<u>PAR VALUE</u>

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>1,000</u>	<u>SHS</u>	<u>NO Par Value</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 4 0 7 *

File Date: 1/17

Check No.: 11294

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.

Shawn Marie Norton 1/15/01
Signature of Officer Date

Shawn Marie Norton
Print or Type Name of Officer

Vice President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 70407		2. Name of Corporation Charland Enterprises, Inc.	
3. Street Address Principal Business Office 168 Benefit Street		City Pawtucket	State RI
4. Business Phone No. (401) 728-1630		5. State of Incorporation RHODE ISLAND	6. SIC Code 5090
7. Brief Description of the Character of Business Conducted in Rhode Island Full service, installation & repairs; Fuel delivery			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name J. M. Norton		Vice President Name Shawn Norton	
Street Address 10 Rose Drive		Street Address 10 Rose Drive	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02861		Zip 02861	
Secretary Name Shawn Marie Norton		Treasurer Name J. M. Norton	
Street Address 10 Rose Drive		Street Address 10 Rose Drive	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02861		Zip 02861	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
Par Value		Par Value	
1,000 SHS NO PAR VALUE		1,000 SHS NO Par Value	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 4 0 7 *

FILED

File Date: _____

MAR 15 2000

Check No.: _____

By: Cc10760

By: _____

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.

Shawn Marie Norton 3-13-00
Signature of Officer Date

Shawn Marie Norton
Print or Type Name of Officer

Vice President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 70407		2. Name of Corporation Charland Enterprises, Inc.	
3. Street Address Principal Business Office 168 Benefit Street		City Pawtucket	State RI
4. Business Phone No. (401) 728-1630		5. State of Incorporation RHODE ISLAND	6. SIC Code 5090
7. Brief Description of the Character of Business Conducted in Rhode Island Full service installation & repairs; fuel delivery			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name J. m. Norton		Vice President Name Shawn Marie Norton	
Street Address P.O. Box 2037		Street Address P.O. Box 2037	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02801		Zip 02801	
Secretary Name Shawn Marie Norton		Treasurer Name J. m. Norton	
Street Address P.O. Box 2037		Street Address PO Box 2037	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02801		Zip 02801	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
1,000 SHS NO PAR VALUE		1,000 SHS	NO Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 4 0 7 *

File Date: **1-1-99**

Check No.: **10129**

By: **AMF**

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.

Shawn Marie Norton 12-28-98
Signature of Officer Date

Shawn Marie Norton
Print or Type Name of Officer

Vice President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 70407 2. Name of Corporation Charland Enterprises, Inc.
3. Street Address Principal Business Office 168 Benefit street City Pawtucket State RI Zip 02861
4. Business Phone No. (401) 728-1630 5. State of Incorporation Rhode Island 6. SIC Code 5090

7. Brief Description of the Character of Business Conducted in Rhode Island
Fuel oil delivery, Full installation and repairs on boiler

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name <u>J. M. Norton</u> Street Address <u>P.O. Box 2037</u> City <u>Pawtucket</u> State <u>RI</u> Zip <u>02861</u>	Vice President Name <u>Shawn Marie Norton</u> Street Address <u>P.O. Box 2037</u> City <u>Pawtucket</u> State <u>RI</u> Zip <u>02861</u>
Secretary Name <u>Shawn Marie Norton</u> Street Address <u>P.O. Box 2037</u> City <u>Pawtucket</u> State <u>RI</u> Zip <u>02861</u>	Treasurer Name <u>J. M. Norton</u> Street Address <u>P.O. Box 2037</u> City <u>Pawtucket</u> State <u>RI</u> Zip <u>02861</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name Street Address City State Zip	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>1,000 SHS</u>	<u>NO PAR</u>	<u>VALUE</u>

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>1,000 SHS</u>	<u>NO PAR</u>	<u>value</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date: 4-3-98

Check No.: 11211

By: SA

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.

Shawn Marie Norton 3-24-98
Signature of Officer Date

Shawn Marie Norton
Print or Type Name of Officer

vice president
Title of Officer



STATE OF RHODE ISLAND
PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 70407		2. Name of Corporation Charland Enterprises, Inc.	
3. Street Address Principal Business Office 168 Benefit Street		City Pawtucket	State RI
4. Business Phone No. (401) 728-1630		5. State of Incorporation RHODE ISLAND	6. SIC Code 5090
7. Brief Description of the Character of Business Conducted in Rhode Island Plumbing, heating, air conditioning, oil delivery, sales and service, and all other lawful activities both within & without this state.			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
President Name J. M. Norton		Vice President Name Shawn Marie Norton	
Street Address P.O. Box 2037		Street Address P.O. Box 2037	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02861		Zip 02861	
Secretary Name Shawn Marie Norton		Treasurer Name J. M. Norton	
Street Address P.O. Box 2037		Street Address P.O. Box 2037	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02861		Zip 02861	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
1,000 SHS NO PAR VALUE		1,000 SHS NO PAR VALUE	
Par Value		Par Value	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 4 0 7 *

File Date: **3/6/97**

Check No.: **10740**

By: **CCR**

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.

Shawn Marie Norton 2-19-97
Signature of Officer Date

Shawn Marie Norton
Print or Type Name of Officer

Vice President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 70407		2. NAME OF CORPORATION Charland Enterprises, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 168 Benefit Street		CITY Pawtucket	STATE RI
		ZIP CODE 02861	
4. BUSINESS PHONE NO. (401) 728-1630		5. STATE OF INCORPORATION RHODE ISLAND	
		6. SIC CODE 5090	
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Oil Delivery, Plumbing, Heating, A/C, Sales & service			
8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME J. M. Norton		VICE PRESIDENT NAME Shawn Marie Norton	
STREET ADDRESS P.O. Box 2037		STREET ADDRESS P.O. Box 2037	
CITY Pawtucket	STATE RI	CITY Pawtucket	STATE RI
ZIP CODE 02861		ZIP CODE 02861	
SECRETARY NAME Shawn Marie Norton		TREASURER NAME J. M. Norton	
STREET ADDRESS P.O. Box 2037		STREET ADDRESS P.O. Box 2037	
CITY Pawtucket	STATE RI	CITY Pawtucket	STATE RI
ZIP CODE 02861		ZIP CODE 02861	
9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	
10. SHARES AUTHORIZED AND ISSUED			
AUTHORIZED SHARES			ISSUED SHARES
NUMBER OF SHARES	CLASS / SERIES	NUMBER OF SHARES	CLASS / SERIES
1,000 SHS NO PAR VALUE		1,000 SHS NO Par Value	

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date:

5/28/96

Check No:

10416

By:

LM

For Secretary of State Use Only

Signature of Officer

Shawn Marie Norton
Print or Type Name of Officer

Vice President
Title of Officer

5-24-96
Date



ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00

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ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 70407 Annual Report for the year: 1995

Name of Corporation: Charland Enterprises

Business entity organized under the laws of the State of: RI

Business Entity is (check one):

☒ Business Corporation (See RJGL Chapter 7-1.1)

☐ Professional Service Corporation (See RJGL Chapter 7-5.1)

For foreign entity, address and telephone number of principal office:

Phone: ()

Brief statement of the character of business conducted in Rhode Island:

Plumbing, Heating, & Air
Conditioning, Oil delivery,
sales, & service, etc.

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

168 Benefit Street
Pawtucket RI 02861

Phone: (401) 728-1630

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>J. Norton</u>	<u>10 Rose Drive</u>	<u>Pawtucket RI</u>	<u>02861</u>
VICE PRESIDENT <u>Shawn Marie Norton</u>	<u>10 Rose Drive</u>	<u>Pawtucket RI</u>	<u>02861</u>
SECRETARY <u>Shawn Marie Norton</u>	<u>10 Rose Drive</u>	<u>Pawtucket RI</u>	<u>02861</u>
TREASURER <u>J. Norton</u>	<u>10 Rose Drive</u>	<u>Pawtucket RI</u>	<u>02861</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
<u>1000</u>	<u>Common</u>

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
<u>1000</u>	<u>Common</u>

Date June 19, 19 95

By: Shawn Marie Norton

Shawn Marie Norton

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Vice President

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 31 must be filed.

FILED
JUN 19 1995
By [Signature]
141722

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: C 70407 Annual Report for the year: 1994

Name of Corporation: Charland Enterprises

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office:

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

168 Benefit Street
Pawtucket RI 02861

Phone: (401) 728-1630

Brief statement of the character of business conducted in Rhode Island:

Plumbing, Heating, air conditioning
oil delivery, sales & service,
etc.

THE NAMES OF THE OFFICERS ARE:

	PRESIDENT	VICE PRESIDENT	SECRETARY	TREASURER
NAME	J. Norton	Shawn Marie Norton	Shawn Marie Norton	J. Norton
STREET ADDRESS	10 Rose Drive	10 Rose Drive	10 Rose Drive	10 Rose Drive
CITY/STATE	Pawtucket RI	Pawtucket RI	Pawtucket RI	Pawtucket RI
ZIP CODE	02861	02861	02861	02861

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares 1,000 Class / Series Common

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares 1,000 Class / Series Common

Date June 19, 19 95

By: Shawn Marie Norton
Shawn Marie Norton

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Vice President

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

FILED

JUN 19 1995

BY J.B.H.
141722

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0070407 Annual Report for the year 1993

FIRST: The name of the corporation is Jaysha ENTERPRISES, INC.

D/B/A Charland Oil Co.

SECOND: It is incorporated under the laws of State of R.I.

THIRD: Character of business, briefly stated, is heating, A/C, Retail heating oil delivery, plumbing sales & service, and all other lawful activities both within and without this State.

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 168 Benefit Street

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

J. M. Norton

President

10 Rose Drive

J. M. Norton

Vice President

10 Rose Drive

S. M. Norton

Secretary

10 Rose Drive

J. M. Norton

Treasurer

10 Rose Drive

SEVENTH: Number of Shares authorized:

No. of Shares

1,000

Class

1,000

Series

Par Value
or statement that
shares are without
par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

Charland Enterprises, Inc.

Dated November 26 1993

Changed to: Jaysha Enterprises, Inc.
(Name of Corporation)

By

J. M. Norton

Title

Pres.

(Report must be signed by an officer)