

Street Address

AUTHORIZED SHARES

2,000 COMM \$1.00 PAR VALUE

Number of Shares

City

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

Z(p

Par Value

Matthew A. Brown. Secretary of State

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

401 222:3040

2005

OFIT CORPORATION ANNUAL REPORT FOR THE YEAR _ Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 2. Name of Corporation 1. Corporate ID No. Valley Heating & Cooling, Inc. 94818 3 Street Address Principal Business Office Wyoming 1146 Main Street 5. State of Incorporation 1. Business Phone No. **RHODE ISLAND** 401-539-0400 Haret Asserting of the Charger of Harsing And Coolong Systems etc. ☐ FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) Vice President Name President Name Same Thomas D. Rekowski Street Address Street Address Street State CityR.I...... ...Wyoming. Treasurer Name Secretary Name Same Street Address Same Street Address ZIP State City Zip State ☐ FILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) Director Name Director Name Street Address Sinci Address State Cin Zip State City Director Name Street Address

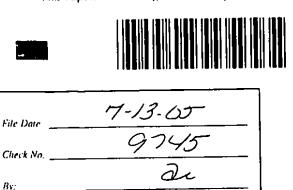
This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

City

ISSUED SHARES

Number of Shares

100



FOR SECRETARY OF STATE USE ONLY

State

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

Class Series

Inder penalty of perjury, I declare and affineluding any accompanying schedules an	irm that I have examined this report, id statements, and that all statements
contained herein are true and correct.	3/36/05
Signature of Officer Thomas De	EKONSKI
Print or Type Name of Officer	
Title of Officer	12 700 to 10th

State

Class/Series

Ommon

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

Zip

Par Value

1, W



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 (FORM MUST BE TYPED OR	1 - March 1 • F				
1. Corporate ID No	2. Name of Corpora	ation			
94818	Valley	··Heating & Co	oling, Inc.		7/0
3 Street Address Principal Bust	ness Office	_	l	State	Zip
1146 MATN : 4. Business Phone No.	STREET	5. State of Incorporatio	<u> </u>	I RT	02898 6. SIC Code
	0.0		Island		232
401-539-041 7. Brief Description of the Char	acter of Business Conducted	d in Rhode Island	ISLANO		100
HVAC 8. NAMES AND ADDRES President Name	SSES OF THE OFFIC	ERS: ("X" BOX FOR AT	TACHMENT)	SPACES BEFORE USING	ATTACHMENTS
Thomas D. Street Address	Rekowski		Thomas D. Sineci Address	Rekowski	
1146 Main :	Street		Same		
Clly	State	Zip	City	State	Zip
Wyoming	RI	10289.8			
Secretary Name			Treasurer Name		
Thomas D	Rekowski		Street Address	Rekowski	
Street Address			Street Madress		
Same		Zip	Same Same	State	Zip
City	State	\".\"			'
9. NAMES AND ADDRE Director Name	SSES OF THE DIREC	TORS: ("X" BOX FOR	ATTACHMENT) FILL Director Name	IN SPACES BEFORE USIN	G ATTACHMENTS
	<u>/A</u>	<u>. </u>	Street Address	N/A	
Street Address			Street Milaress		
Gity	State	Zip	City	State	Zip
Director Name		J	Director Name		
N	/A		N/2		<u> </u>
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIS	ZED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED	 - ("X" BOX FOR ATTACH	 MENT) []
AUTHORIZED SHARES	•	, _	ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Senus	Par Value
·		-			Ţ
2.000 C	omm S_1_00_F	PAR Value	100	Common	\$1.00
				<u> </u>	
This report mus	st be signed in ink by	r either the President, Vic	ce President, Secretary, Assi	stant Secretary, Treasurer,	Receiver or Trustee
•					
			Under penalty of	perjury, I declare and affirm th	nat I have examined this
			including any acc	companying schedules and stat	ements, and that all stat
			contained herein	are true and correct.	1 1 .
File Date 324	109			m.) 1), lu	n/1 3/17/
0.0	<u> </u>		Signature of Office	, \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date /
Check No	\bigcirc		17/10	nus Dillela	cushi
19			Print or Type Ngm	e of Officer	· · · · · · · · · · · · · · · · · · ·
By:		-	·) ^ ()	
FOR SECRETARY	OF STATE USE ONLY		Title of Officer	, CO	
i		1	ine of Office,		

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

94818

Valley Heating & Cooling, Inc.

3. Street Address Principal Business Office

City

State

Zip

1146 Main Street

5. State of Incorporation

Wyoming

RI

02898

401-539-0400 RI
7. Brief Description of the Character of Business Conducted in Rhode Island

RHODE ISLAND

232

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

President Name

City

Thomas D. Rekowski

Thomas D. Rekowski

1146 Main Street

Sàme

Thomas D. Rekowski

State

State

FILL IN SPACES BEFORE USING ATTACHMENTS

Zip

Wyoming Secretary Name

RI

02898

City

Treasurer Name

Thomas D. Rekowski

Director Name

Street Address

Director Name

City

City

Zip

Same Same ZipState

Zip

Zip

Zip

Director Name

Street Address

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

N/A

Street Address

State

State

Zip

Director Name

Street Address

City

City

N/A

N/A

Street Address N/A

State

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

State

Zip

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

ESSUTED SHARES

Number of Shares

Glass/Series

Par Value

2,000 COMM \$1.00 PAR VALUE

100

➾

Common

\$1.00

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



File Date:

FOR SECRETARY OF STATE

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.

Title of Offices

Famil 630 12/02

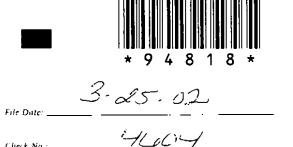


100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate 1D No. 2 Name of Corporation 94818 Valley Heating & Cooling, Inc. City 3 Street Address Principal Business Office 02898 RI Wyoming 1146 Main Street 4. State of Incorporation 232 RHODE ISLAND 401- 539-0400 7 Brief Description of the Character of Business Conducted in Rhode Island RI 02832 Installation of heating & cooling systems/Mailing address-PO Box 191 Hope Valley 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Same Thomas D. Rekowski Street Address 90 Highview Avenue State Zip City 02832 RΙ Hope Valley, Treasurer Name Secretary Name Same Same Street Address Street Address State City State Zin 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS N/A Street Address Street Address Zip City State Director Name N/A N/A Street Address Street Address Zip State ZipCity State 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES Par Value Number of Shares Class/Series Number of Shares Class/Series Par Volue 2,000 COMM \$1.00 PAR VALUE \$1.00 100 Common

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



FOR SECRETARY OF STATE USE ONLY

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Title of Officer Form 630 - 12/91 4 5 5

Under penalty of perjury, I declare and affirm that I have examined



Corporations Division 100 North Main Street, Providence, RI 02903-133 401-222-304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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PLEASE READ INSTRUCTIONS
INSTRUCTIONS

21 July 20 19799

(FORM MUST BE TYPED IN BLACK)				· <u></u>	
. Curpurate II) No.	2. Name of Corpora	tion			
94818 Street Address Principal Business Offi	<u>Valley</u>	<u> Heating & Co</u>	oling, Inc.	State	Zip
,			Wyoming	RI	i 02898
1146 Main Street Business Phone No.	<u>-</u>	15. State of Incorporation			6 SIC Code
401-539-0400		Rhode Isl	and		0232
Intel Description of the Character of I	Business t, anducted				RI 02832
Installation of	heating	& cooling sys	stems / Mailing	Address-PO Box	191 Hope Va
3. NAMES AND ADDRESSES	OF THE OFF	ICERS ("X" BOX FOR ATTA	CHMENT) DFILL IN SPACES	BEFORE USING ATTACH	MENTS
resident Name			Vice President Name		
Thomas D. Rekows	sk <u>i</u>		Same Street Address		
			i street risality	·	
90 Highview Aver	Nue State	Zip	City	State	Zip
Hope Valley	RI	02832			· i
ecretary Name			Treasurer Name		
Same			Same		
street Address			Street Address		
				110,00	
City	State 	Z:p	City	State	1,14
9. NAMES AND ADDRESSE	COUTUE DID	FCTORS (ext pay cop at	TEACHUENT) THE LIN SPAC	FS REFORE USING ATTA	CHMENTS
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N/A			N/A		
Street Address			purect mulitors		
City	State	Zip	City	State 	Z_{ip}
<u> </u>	<u> </u>		Director Name		·
Director Name			j -		
N/A Street Address			N/A Street Address	<u> </u>	
7.100 · 100					
City	State	Zip	City	State	! Zip
	!				
10. SHARES AUTHORIZED	("X" BOX FOR AT	TACHMENT) 🖸	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT)	<u>D</u>
AUTHORIZED SHARES			LSUTO SHARES	I 5 ·	
Number of Shares	Class/Stries	Par Value	Number of Shares	Class/Scries	Par Value
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		.1 .1 .5	- D : 3	elekant Causatam Tana	ror Dacoiver or True
This report must be signe	l in ink by ei	ther the President, Vic	ce President, Secretary, As	sistant Secretary, Treasu	ier, Receiver or irus
			11 - 4	perjury, I declare and affirm	that I have a remed
				perjury, i declare and aritin ling any accompanying sche	
10	18-01	<u> </u>		s contained herein are true	
File Date:	18-01		1/1		1. 11.11.
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Check No.:	<u> </u>		Sign three of Officer	Dala arrabat	
7				. Rekowski	
By:	۱ــــــــــــــــــــــــــــــــــــ		Print or Type Name of		
FOR SECRETARY OF STATE USE ON	SLY		Presiden Title of Officer	. <u>t</u>	·
		!	nere of Chucer		

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

	~	~ ~	O 2110 2 2 O 21		
FIIIn	g Perloc	t: January	1-March 1 •	Filing Fee: \$50.00	

FORM MUST BE TYPED IN BLACK)	

1. Corporate ID No.

2. Name of Corporation

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Valley Heating & Cooling, Inc.

3. Street Address Principal Business Office

State

Zip

1146 Main Street

4. Business Phone No.

Wyoming 5. State of Incorporation

RI

02898 6. SIC Code

400+539-0400

RHODE ISLAND

232

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

Install 8. NAMES A President Name	ation of heating AND ADDRESSES OF THE OF	and cooling FICERS (*x* BOX FO	g systems, etc RATTACHMENT) FILL I Vice President No		ATTACHMENT
Thomas	D. Rekowski		Thomas Street Address	D.Rekowski	
90 Hig	ghview Xve.	Zip	Same _{City}	State	Zıj

Hope Valley

RI_

Secretary Name

State

02832...

Same.

Same Street Address

Same

City

City

City

Zip

City

State

Zip

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

Director Name N/A Street Address

N/A Street Address

State

City

Director Name

N/A Street Address

Zip

Director Name

N/A

Street Address

State

Zip

City

State

ZIp

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

AUTHORIZED SHARES

Number of Shares

Class/Series

ISSUED SHARES Number of Shares

Class/Series

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

Par Value

2,000 COMM \$1.00 PAR

100

\$1.00

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



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 stagements contained herein are true and correct.

Date

e Name of Officer

Title of Officer

MINUTES OF ANNUAL MEETING OF SOLE SHAREHOLDER VALLEY HEATING AND COOLING, INC.

The annual meeting of the sole shareholder of Valley Heating and Cooling, Inc. was held at the office of Valley Heating and Cooling, Inc., 1146 Main Street, Wyoming, Rhode Island, on Friday, April 9, 1999 at 4:00 P.M.

There was present: Thomas D. Rekowski, being sole shareholder of Valley Heating and Cooling, Inc.

The meeting was called to order by Thomas D. Rekowski, President of the corporation, who acted as Secretary of the meeting.

RESOLVED, that the following officers are elected to serve for one year and until their successors elected and qualified.

President:

Thomas D. Rekowski

Vice President:

Thomas D. Rekowski

Secretary:

Thomas D. Rekowski

Treasurer:

Thomas D. Rekowski

RESOLVED, that the actions of the officers during the past year be and same are hereby ratified. There being no further business, the meeting, on motion duly made, seconded and carried, was adjourned.

Thomas D. Rekowski

Secretary

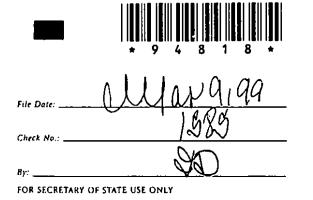
Dated: April 9, 1999

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. 2. Name of Corporation Valley Heating & Cooling, inc. 94818 City State Zip 3. Street Address Principal Business Office 02898 RI Wyoming 1146 Main Street S. State of Incorporation 6. SIC Code RHODE ISLAND 232 (401)539-0400 7. Brief Description of the Character of Business Conducted in Rhode Island Installation of heating and cooling systems, etc. 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Thomas D. Rekowski Thomas D. Rekowski Street Address Street Address 90 Highview Avenue Same City Zip City State 02832 Hope Valley RΙ Treasurer Name Secretary Name Thomas D. Rekowski Thomas D. Rekowski Street Address Street Address Same Same City Zip City State 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name N/A N/A Street Address Street Address City City Director Name Director Name N/A N/A 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 2,000 COMM \$1.00 PAR 100 \$1.00 Common

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.

Thomas D. Rekowski
Print or Type Name of Officer

... Pro-

President
Tille of Officer



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

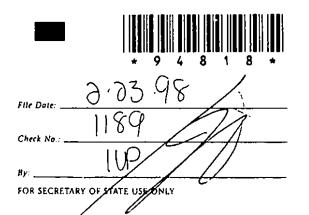
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Carporate ID No.	2. Name of Corpora	tion			
94818	Valley Heat	ing & Cooling, inc			
3. Street Address Principal Busines	is Office		Clly	State	Zip
90 Highview	Ave		Hope Valley	RI	02832
4. Business Phone No.		S. State of Incorpora	tion		6. SIC Code
(401) 539	-0400	RHODE ISL	AND		0232
7. Brief Description of the Charact	er of Business Conducted I	n Rhode Island			
Installing,	repairing h	eating and	cooling equipmen	t	
8. NAMES AND ADDRE					
President Name,			Vice President Name		
Thomas D. Rek	owski		Thomas D. R	ekowski	
Street Address 90 Highview A	venue		Street Address Same		
City	State	Zip	City	State	Zip
Hope Valley	RI	02832			
Secretary Name			Treasurer Name		•
Thomas D. Rek	owski		Thoma	s D. Rekowski	
Street Address			Street Address		
Same	•		Same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRE	SSES OF THE DIRI	ECTORS (*x* BOX FOR	ATTACHMENT)		
Director Name			Director Name		
N/A			N/A		
Street Address	·		Street Address		
City	State	21p	Clty	State	Zip
Director Name			Director Name	•	
N/A			N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZ	ED ("X" BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT	")
Number of Shares	Class/Serles	Far Value	Number of Shares	Class/Series	Par Value
2,000 COMM \$1.00	PAR		100	Common	\$1.00

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.

Prints or Type Name of Officer

Title of Officer