



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. 141024		2. Name of Corporation C.J. TREE, INC.			
3. Street Address Principal Business Office 950 SMITH STREET			City PROVIDENCE	State RI	Zip 02908
4. Business Phone No. (401) 421-1170		5. State of Incorporation RHODE ISLAND			6. SIC Code 2238
7. Brief Description of the Character of Business Conducted in Rhode Island TO CARRY ON AND CONDUCT A GENERAL TREE CUTTING, TREE CARE, EXCAVATING, EARTH-MOVING, TRACTOR AND CONTRACTING BUSINESS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CARL S. HAMMERLE, JR.			Vice President Name CARL S. HAMMERLE, JR.		
Street Address P.O. BOX 9232			Street Address P.O. BOX 9232		
City WARWICK	State RI	Zip 02689	City WARWICK	State RI	Zip 02889
Secretary Name CARL S. HAMMERLE, JR.			Treasurer Name CARL S. HAMMERLE, JR.		
Street Address P.O. BOX 9232			Street Address P.O. BOX 9232		
City WARWICK	State RI	Zip 02889	City WARWICK	State RI	Zip 02889
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			100 SHS	COMMON	NO PAR

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



File Date 2/18/05
Check No. 7726
By: U.

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.

Carl S. Hammerle, Jr.
Signature of Officer _____ Date _____
CARL S. HAMMERLE, JR.
Print or Type Name of Officer
PRESIDENT