

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

PROFIT CORPO	RATION AND	NUAL REPO	RT FOR THE YEA	R 2005	_
Filing Ferioa: January 1 - 7 (FORM MUST BE TYPED IN BL	• • • • • • • • • • • • • • • • • • • •	ree: \$50.00	. ~		
1. Carparate ID No. 32932	2. Name of Corporation CHESTER'S SER	RVICE STATION, IN	IC.	· -	
3. Street Address Principal Busine. 351 DOUGLAS PIKE	u Office	· • ·	City SMITHFIELD	State RHODE ISLAND	[*] Ζφ · 02917
4. Business Phone No. 401-231-9789		5. State of Incorporation RHODE ISLAND		INIODE TOMANO	6. SIC Code 3558
7. Brief Description of the Character RETAIL GASOLINE AND					
8. NAMES AND ADDRESSI		RS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES	BEFORE USING ATTAC	HMENTS
President Name FRANK SLEBODA			Nice President Name NONE		
Stree Address 351 DOUGLAS PIKE	•	· — ·—— -·	Street Address		·
City —		Ziφ ···· ————	City	State -	Zip ·
SMITHFIELD	RHODE ISLAND	02917	T N		
Secretary Name MARILYN L. SLEBODA			Treasurer Name MARILYN L. SLEBODA		
Street Address			Street Address	· • · •	• •
351 DOUGLAS PIKE	* =		351 DOUGLAS PIKE		
City SMITHFIELD	State RHODE ISLAND	- Ζέρ ι η ό ο ι σ	City SMITHFIELD	State RHODE ISLAND	Zip
			TACHMENT) TILL IN SPACE Director Name		02917 CHMENTS
WILLIAM T. SLEBODA	•		EDWARD J. SLEBODA		•
Street Address	, , , , ,	• •	Street Address		•
458 PLORA CREEK COL	ЛТ		29 WHICHITA ROAD	a a see e a a a a a a a a a a a a a a a	• •
City LAKE MARY	State FL	Zip 32746	City MEDFIELD	State	Zip 02052
Director Name	FU		Director Name	rues .	02032
FRANK SLEBODA			MARILYN L. SLEBODA		_
Street Address 351 DOUGLAS PIKE	D		Street Address 351 DOUGLAS PIKE		
Chy SMITHFIELD	State RHODE ISLAND	<i>Zip</i> 02917	Cițy SMITHFIELD	State RHODE ISLAND	^{2ip} 02917
10. SHARES AUTHORIZED AUTHORIZED SHARES	O ("X" BOX FOR ATTA	CRMENT)	11. SHARES ISSUED ("X" BOX ISSUED SHARES	FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
2,000 NO PAR VALUE			2,000	COMMON	NO PAR VALUE
	, prince 1 m	-	-		· · · · · · · · · · · · · · · · · · ·
This report must he signed	in ink by either the	e Presideni, Vice Pre	sident, Secretary, Assistant	Secretary, Treasurer,	Receiver or Trustee
			11.4		
J 2 9 3			Under penalty of perjury, I this report, including any a		
			and that all statements con		
File Date	1-28-65 Ho5-7	!-	mariland	I lebala_	1/25/05
Check No.	8657		Signature of Officer	Date	
	a.		Print or Type Name of Officer	. SLEBODA	1
FOR SECRETARY OF STATE U	ISE ONLY		TREASURER		
TON SECRETARY OF STATE (OF UITLE		Title of Officer		Form 630 12/01



PROFIT CORPO	March I • Filing	Fee: \$50.00			
FORM MUST BE TYPED IN BL L. Corporate ID No	ACK) 2. Name of Corporation				
32932	CHESTER'S SEI	RVICE STATION, IN	NC.		
3. Street Address Principal Busine	ss Office		City	State	Ziφ
351 DOUGLAS PIKE		f Comments	SMITHFIELD	RHODE ISLAND	02917
4. Business Phone No. - 401-231-9789		5 State of Incorporation RHODE ISLAND			6. SIC Code 3558
7. Brief Description of the Churac RETAIL GASOLINE AND					****
8. NAMES AND ADDRESS		RS ("X" BOX FOR ATTA	(CHMENT) FILL IN SPACES Vice President Nume	BEFORE USING ATTAC	HMENTS
President Name FRANK SLEBODA			NONE		
Street Address			Street Address		
351 DOUGLAS PIKE					
City	State	Zip	City	State	7.ip
SMITHFIELD	RHODE ISLAND	02917			
Secretary Nume			Treusurer Name		
MARILYN L. SLEBODA			MARILYN L SLEBODA		
Street Address 351 DOUGLAS PIKE			Street Address 351 DOUGLAS PIKE		
City	State	Zip	City	State	Zip
SMITHFIELD	RHODE ISLAND	•	SMITHFIELD	RHODE ISLAND	02917
			TTACHMENT) TILL, IN SPACE	ES BEFORE USING ATT	ACHMENTS
EDWARD J. SLEBODA			WILLIAM T. SLEBODA		
Street Address			Street Address		
58 GRANITE STREET			583 ELDER BALLOU R	OAD	
City	State	Zip	City	State :	Zip
MEDFIELD	M.A.	02052	WOONSOCKET	RHODE ISLAND	02895
Director Name FRANK SLEBODA			Director Nume MARILYN L. SLEBODA		
Street Address			Street Address		
351 DOUGLAS PIKE			351 DOUGLAS PIKE		
City	State	Zip	City	State	7.ip
SMITHFIELD	RHODE ISLAND		SMITHFIELD	RHODE ISLAND	02917
10. SHARES AUTHORIZE	D ("X" BOX FOR ATT	ACHMENT) 🔲	11. SHARES ISSUED ("X" BO.	X FOR ATTACHMENT) []
AUTHORIZED SHARES	Class/Series	Par Value	ISSUED SHARES Number of Shares	Class/Series	Par Value
Number of Shares	Ciasisenes	y ar value	Trimber by termina		
2,000 NO PAR VALUE			2,000	COMMON	NO PAR VALUE
This report must be signe	d in ink by either th	e President, Vice Pr	esident, Secretary, Assistant	Secretary, Treasurer	; Receiver or Trustee
OR STANK CINE COM	. IMB 118				
3 2 9	3 2		Under penalty of perjury,	I declare and affirm that	1 have examined
			this report, including any		
]	and that all statements co	ntained herein are true at	nd correct.
E11.000 1-11-0	S.C.		Zha.	nto All	Ada 1/12/0
File Date	14		Signature of Officer	Date	CLAEX 1 7º
Check No. 8196			Frank Śleboda	1	
			Print or Type Name of Office		<u></u> .
l. 🗸 – -		I			•
By			President		



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 2003 Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN L 1. Corporate ID No.	BLACK) 12. Name of Corporation	n			
32932		ERVICE STATION			
3. Street Address Principal Busin	ness Office	*	City	; State	Zip
351 DOUGLAS PIKE			SMITHFIELD	RHODE ISLAND	02917
4. Business Phone No.		5. State of Incorporation			6. SIC Code
401-231-9789		RHODE ISLAND			3558
7. Brief Description of the Char RETAIL GASOLINE AND					
8. NAMES AND ADDRES	SES OF THE OFFIC	ERS ("X" BOX FOR ATT	ACHMENT) FILL IN SP	ACES BEFORE USING ATTAC	HMENTS
President Name			Vice President Name		• •
FRANK SLEBODA			NONE	ن در وسواليان ولودرية موالومانيات و وستشالت مارنسال المارنس ، والا مار	
Street Address			Street Address		
351 DOUGLAS PIKE		, <u>_</u>			
City	State	!Zip	City	State	i Zip
SMITHFIELD Secretary Name	RHODE ISLANT	7 02917	Treasurer Name		
MARILYN SLEBODA			MARILYN SLEBODA		
			Street Address	·	
Sireei Address 351 DOUGLAS PIKE				777	
		- , <u>-</u> ,	351 DOUGLAS PIK		
City SMITHFIELD	State	; <i>Zip</i>	City	State	Zip
	RHODE ISLANI		SMITHFIELD	RHODE ISLAND	102917
9. NAMES AND ADDRES Director Name	SES OF THE DIREC	TORS ("X" BOX FOR A		SPACES BEFORE USING ATT	ACHMENTS
		•	Director Name		
FRANK SLEBODA			MARILYN SLEBODA	↑ 	~
Sircei Address			Sirect Address	' D	
351 DOUGLAS PIKE		·	351 DOUGLAS PII		
Ciņ:	State	'Zip	·Ciny	State	Zip
SMITHFIELD	RHODE ISLAND) 02917	SMITHFIELD	RHODE ISLAND	02917
Director Name			Director Name	2003	
EDWARD J. SLEBODA	'1 	···	WILLIAM T. SLEE	SOUA	
Street Address 58 GRANITE STREET			*Sireci Address *583 ELDER BALLO	ממס זוי	
City	Siare	Zip	-City	State	Zip
MEDFIELD	M.A.	02052	WOONSOCKET	RHODE ISLAND	02895
10. SHARES AUTHORIZ				"BOX FOR ATTACHMENT)	
AUTHORIZED SHARES	ED (A BOATOKAI	MCHMENT) [ISSUED SHARES	L BOX FOR ALLACTIMENT)	J
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
2,000 NO PAR VALUE			2,000	I COMMON	NO PAR VALUE
					,
This conner must be sign	ed in ink by aither	he President Vice Pr	esident Secretory Assi	stant Secretary, Treasurer,	Pacainar or Trusta
rms report must be signe	La in ina by Eliner	ne i resident, rice i r	estaem, ocerciary, masi.	siam secretary, treasurer,	Acceiver or Triiste
11	18 1 1				
3 2 9	3 2		Under penalty of per	rjury, I declare and affirm that .	I have examined
<u> </u>		_		g any accompanying schedules	
			and that all statemen	nts contained herein are true an	d correct.
5/1- 0-11	120/13		IM NA I	2 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	10/200
File Date 04			1 Juni	CHAMINA SI	10/1003
Check No.	1167		Signorifie & Officer	r Dale	
			Frank Slebo		
By	<i>y</i>		Print or Type Name of	Officer	
· · · · · · · · · · · · · · · · · · ·	HISE ONLY		President		
FOR SECRETARY OF STATE	USE UNLY	·	Title of Officer		Form 630 12/0

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

STOP PLEASE READ INSTRUCTIONS

					The state of the s
(FORM MUST BE TYPED IN BLACK	:)				
1. Corporate ID No.	2. Name of Corporation			•	
32932		VICE STATION, INC.			
3. Street Address Principal Business Of	fice		City	State	Zip
351 Douglas Pi 4. Business Phone No.	ke	5. State of Incorporation	Smithfield	R.I.	02917 6. SIC Code
401-231-9789 7. Bilef Description of the Character of	Business Conducted in Rho	RHODE ISLAND de Island			3558
Retail Gasolin 8. NAMES AND ADDRESSE Fresident Name	e and Servic s of the Officer		GENT) FILL IN SPACES Vice President Name	S BEFORE USING ATTACHM	IENTS
Frank Sleboda Sueen Address			None Street Address		
351 Douglas Pik	e State	Zip	City	State	Zip
Smithfield . Secretary Kame	R.I.	02917	Treasurer Name		
Marilyn Slebod	a		Marilyn S	Sleboda	
351 Douglas Pi _{City}	ke State	Zip	351 Doug!	las Pike State	Zip
Smithfield 9. NAMES AND ADDRESSE Director Name	R.I. S OF THE DIRECTO	02917 ORS (*x* box for attac	Smithfield HMENT) FILLIN SPAC Director Name	R.I. CES BEFORE USING ATTACK	02917 IMENTS
Frank Sleboda			Marilyn S. Street Address	leboda	
351 Douglas Pi	ke State	Zip	351 Dougla	as Pike State	Zip
Smithfield Director Name	R.I.	02917.	Smithfield Director Name	i R.I.	02917
Edward J. Sleb	ooda		William !	r. Sleboda	
58 Granite Stre	eet State	Zip	583 Elde:	r Ballou Road	Zip
Medfield 10. SHARES AUTHORIZED AUTHORIZED SHARES	M.A.	02052 (ENT)	Woonsocke 11. Shares Issued Issued Shares	R.I. (*X* BOX FOR ATTACHMENT)	02895
Number of Shares	Class/Series	Par Value	Number of Shares	Cluss/Sertes	Par Value
2,000 NO PAR VALUE			2,000	Common	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:	1-23-02
Check No.:	. 7324
Ву:	2
FOR SECRETARY OF STA	TE 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.

mailyn I Ilchula	1/20/02	
Signature of Office	Date	
MARILYN I SLEBODA		
Print or Type Name of Officer		

Secretary / Treasurer

Title of Officer

R.I.



1. Corporate ID No. 32932

4. Business Phone No.

Street Address

Secretary Name

Street Address

3. Street Address Principal Business Office

401-231-9789

Frank Sleboda

Marilyn Sleboda

FOR SECRETARY OF STATE USE ONLY

351 Douglas

Smithfield

351 Douglas Pike

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

Pike

State

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

State of Incorporation RHODE ISLAND

02917

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

Smithfield

Vice President Name

None Street Address

2. Name of Corporation SERVICE STATION, INC.

Zip

STOP PIEASI READ INSTRUCTIONS

02917

6. 355**8**

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

(FORM MUST BE TYPED IN BLACK)

Retail Gasoline and Service Station

R.I.

351 Dougla	s Pike State	Zip	351 Dougla	s Pike State
Smithfield 9. NAMES AND ADD Director Name	R.I. RESSES OF THE DIREC	02917 CTORS ("X" BOX FOR ATT	Smithfield (ACHMENT) FILLIN SPAC (Director Name	CES BEFORI
Frank Slebe	oda		Marilyn Sl	eboda
351 Dougla	s Pike State	Zip	351 Dougla	s Pike State
Smithfield Director Name	R.I.	02917	Smithfield Director Name	
Edward J. Street Address	Sleboda		William T. Street Address	Sleboo
58 Granite	Street State	Z.ip	583 Elder	Ballot State
Medfield 10. SHARES AUTHOR AUTHORIZED SHARES	M.A. IZED ("X" BOX FOR ATTAC	02052 CHMENT)	Woonsocket 11. SHARES ISSUED ISSUED SHARES	
Number of Shares	Class/Series	Par Value	Number of Shares	Class
2,000 NO PAR	VALUE		2,000	
This report must be s	signed in ink by eithe	r the President, Vice	President, Secretary, As Under penalty of p	
	2/2		this report, includ	
File Date:C	2/28 10887		that all statements	s contained 1
	7		Signature of Office Marilyn S Print or Type Name of	

City	State		Zip	
Treasurer Name		•		
Marilyn S	Sleboda			
351 Dougl	as Pike		Zip	
Smithfiel HMENT) FILLINSI Director Name	d PACES BEFORE	R.I. USING ATTACI		2917
Marilyn S	Sleboda			
351 Doug	las Pike State		Zíp	
Smithfie:	l d	R.I.	_ 0	2917
William ?	r. Slebod	la	•	
583 Elder	Ballou State	Road	Zip	
Woonsocke 11. Shares Issui		R.I.	0	2895
Number of Shares	Class	'Series	Par Value	
2,000		Common	No	Par
			Val	ue
esident, Secretary,	Assistant Secr	etary, Treasure	r, Receive	r or Truste
•		•	}	
	of perjury, I deci			
	luding any accor ents contained h			tements, an

Secretary / Treasurer

Title of Officer



Check No.:

FOR SECRETARY OF STATE USE ONLY

SEC'Y 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. 2. 32932 C	Name of Corporation HESTER'S S	ERVICE STATION,	INC.		
3. Street Address Principal Business Office		 	City	State	Zip
35! DOUGLAS.	_P;Ke	, - · ·	Smithfield	R.T.	02917
4. Business Phone No.		S. State of Incorporation RHODE ISLAND			6. SIC Code 3558
401 - 231 - 9789 7. Brief Description of the Character of Bus	iness Conducted in Ph	1			. 1
GASOLINE and S					
8. NAMES AND ADDRESSES O			IMENT) FILL IN SPACES BE	FORE USING ATTACH	MENTS
President Name		The state of the s	Vice President Name		
FRANK SLEDOO	19		NONE_		
			Street Address		
351_ POUGLAS	PIKE	Zip	: City	State	l Zip
Smithfield su	"RI	62917	City) state	i
Secretary Name			Treasurer Name		
MARILYN_Sle	hada		MARILY N_	Slehoda	
Street Address	_		Street Address		
351_DOUG/4.5_	Pike_	· · · · · · · · · · · · · · · · · · ·	351_ Nous	5/AS_PIKE	
Smithfield su	RT.	211/029/7	Smith field	State	21p
	./ ' 	ORS ('X' BOX FOR ATT		REPORT USING ATTAC	02917
9. NAMES AND ADDRESSES (Director Name	or the Dikect	ORS (A BOX POR ATTA	: Director Name	DELOKE CSING ATTAC	
FRANK Sleb.	oda		MARILY N_S	Steboda	
Street Address			. Miller Appless		
351_Douglas_	_Pike		351 Doug	105 Pike_	
City Sun: Lh Coalal St	ate DT	02917	City Sandla for lat	State	12910
Smith field	<i>A.+</i>	1 02///	Smith field		
Edward Sle			William_	Stebada	N 197
Street Address	00014		Street Address		· 25
58 GRONIT	STREE	et	5.83_Elde	R Ballou Ko	rad ::
City St	ate	ZIP	City	State	
medfield.	MA	02052	: WOONSOCKE	FI KI	-028 75
··- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·-	BOX FOR ATTACH	IMENT) <u>(</u>	11. SHARES ISSUED (*X:	BOX FOR ATTACHMENT)	
AUTHORIZED SHARES Number of Shares CI	ass/Series	Par Value	Number of Shares	Class/Series	Par Value
2,000 SHS NO PAR VAI			·- 		-
:	-		2,000	COMMON	NO PAR VALUE
					1-
· · · · · · · · · · · · · · · · · · ·					
This report must be signed in	ink by either	the President, Vice	President, Secretary, Assist	ant Secretary, Treasur	er, Receiver or Truste
ER DIKK DELETI 1	19 19100 HUTO HOS 1891				
	<u> </u>				
* 3 2	9 3 2 *		• • • •	ury, I declare and affirm	
, p 1	ID IND			any accompanying sched ntained herein are true a:	

 $\overline{\mathbb{Q}}, \overline{\mathbb{A}}$

Signature of Office

Title of Officer

MARILYN L
Print or Type Name of Officer

SECRETARY

SLEBODA

TREASURER

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 BLA	ACK)		.			
1. Corporate ID No.	2. Name of Corporati					
32932	CHESTER'S	SERVICE STATION	I, INC.			
3. Street Address Principal Business			City	State	Zip	
95 LIMEROCK RO)AD		SMITHFIELD	R.I.	02917	
4. Business Phone No.		5. State of Incorporation			6. SIC Code	
(401) 231-978	19	RHODE ISLAI	ND		3558	
7 Brief Description of the Characte	no (Business Conducted in	Rhode Island a service si	tation and such o	ther busines	s as usual.	
8. NAMES AND ADDRES	SES OF THE OFFIC	CERS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES B	EFORE USING ATTAC	HMENTS	
President Name			Vice President Name			
FRANK SLEBODA			EDWARD J. SLEE	BODA	1	
Street Address			Street Address			
95 LIMEROCK RO	DAD		95 LIMEROCK I	ROAD		
City	State	Zip	City	State	Zip	
SMITHFIELD	R.I.	02917	SMITHFIELD	R.I.	02917	
Secretary Name	**	***************************************	Treasurer Name	•••••••••		
WILLIAM T. SLE	BODA		MARILYN L. SLI	EBODA		
Street Address		Street Address				
95 LIMEROCK RO)AD		95 LIMEROCK ROAD			
City	State	Zip	City	State	Zip	
SMITHFIELD	R.I.	02917	SMITHFIELD	R.I.	02917	
9. NAMES AND ADDRES	SSES OF THE DIRE	CTORS ("X" BOX FOR AT	TACHMENT) . FILL IN SPACES	BEFORE USING ATTA	CHMENTS	
Director Name	•	- -	Director Name			
FRANK SLEBODA	1		MARILYN L. SLI	EBODA		
Street Address		·	Street Address			
95 LIMEROCK F	ROAD		95 LIMEROCK ROAD			
City	State	Zip	City	State	Zip	
SMITHFIELD	R.I.	02917	SMITHFIELD	R.I.	02917	
Director Name	*******************	• • • •	Director Name	· · · · · · · · · · · · · · · · · · ·		
Street Address			Street Address		·	
			•			
City	State	Zip	: City	State	Zip	
	1	•	:	1		
10. SHARES AUTHORIZI	ED ("X" BOX FOR ATTA	CHMENT) L	11. SHARES ISSUED (*)	C BOX FOR ATTACHMENT) C	
AUTHORIZED SHARES	<u> </u>		ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value .	
						
2,000 SHS NO PAR	VAL		2,000	COMMON	NO PAR VALUE	
·————						
			i			
L			<u> </u>			
This report must be slg	ned in ink by eith	er the President, Vic	e President, Secretary, Assis	tant Secretary, Treas	urer, Receiver or Trustee	
		• .			•	
1 1881		· · · · · · · · · · · · · · · · · · ·				
	88 III 118 18 18 18 18 18				••	

* 3 2 9 3 2 *	Under penalty of perjury, I declare and affirm that I have examined	
File Date: Way 3, 99 Check No.: - 6/22	this report, including any accompanying schedules and statements, that all statements contained herein are true and correct.	
By: FOR SECRETARY OF STATE USE ONLY	FRANK SLEBODA Print or Type Name of Officer PRESIDENT Tute of Officer	



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

(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No.	2. Name of Corporat	lon		•	
32932	CHESTER'S	SERVICE STATIO	N, INC.		
3. Street Address Principal Business			City	State	ZIp
95 Limerock Ro	oad	S. State of Incorporati	Smithfield	RI	02917 6. SIC Code
(401) 231-9789 ^{7.8} 46 ^D CBHTUCE	9 ={	RHODE ISLA off amservice	AND station and suc	h other busi	3558 ness as usual,
proper and nece 8. NAMES AND ADDRESS President Name	essary in s SES OF THE OFFI	such enterpri CERS (*X* BOX FOR AT	LSC . FACHMENT) Vice President Name		
Frank Sleboda Street Address			None Street Address		
95 Limerock Roa	ad State	Zip	City	State	Zip
Smithfield Secretary Name	RI	02917	Treasurer Name		
Marilyn Lissiel	boda		Marilyn LloS Street Address	leboda	•
95 Limerock Roa	ad State	Zip	95 Limerock	Road State	Zip
Smithfield 9. NAMES AND ADDRES Director Name	RI SES OF THE DIRE	02917 ECTORS (*x* BOX FOR	Smithfield ATTACHMENT) Director Name	RI	02917
Frank Sleboda Sueet Address			Marilyn L S	leboda	
95 Limerock Roa	ad State	Zip	95 Limerock	Road State	Zip
Smithfield Director Name	RI	02917	Smithfield Director Name	RI	02917
None Street Address			None Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	D (*x* box for att	ACHMENT)	11. SHARES ISSUED ((*X* BOX FOR ATTACHME	NT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value

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

2,000

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File Date: Check No.: _	-5730
Ву:	UP MI
FOR SECRET	ARY OF STATE USE ONLY

2,000 SHS NO PAR VAL

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.

Date

Common

No Par Val

Signature of Officer

Frank Sleboda
Print or Type Name of Officer

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

ng Fee: \$50.00		01.04.05 7/75 07 7	BART III BI ABY III		
RPORATE ID HO.	1 2. NAME OF CORPORATION	PLEASE TYPE OR P	RINT IN BLACK INK.		
POPUMATE ID ITU.	2 hours or convolution				
32932		S SERVICE STAT			
TREET ADDRESS PROYCIPAL BUSINESS OFFIC	Ε		απν	STATE	ZP COOE
351 Dougl	as Pike		Smithfield	R.I.	02917
USINESS PHONE NO.		STATE OF PICORPORATION			6 SIC CODE
		RHODE ISI	מאג		3558
(401) 231	-9789				1 3330
RIEF DESCRIPTION OF THE CHARACTER OF BI				_1	
		tattion and such o	ther business as is us	uar, proper and	
necessary in such en	remnise.	S AND ADDR	ESSES OF THE OF	FICERS	
SIDENT NAKE			VICE PRESIDENT NAME		
Frank Sle	boda		1 Non	ie	
ET ADORESS			STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	
95 Limero	ck Road		•		
	STATE	7 20P COOE	äny	STATE	ZIP COOE
Smithfield	R.I.	02917		•	
RETARY NAME		n -Arolin northannings	TREASURER NAME		
Marilyn S	leboda		Marily	n Sleboda	
ET ADDRESS			STREET ADDRESS		
95 Limero	ck Road		95 Lin	nerock Road	
	STATE	ZIP CODE	CITY	STATE	ZP CODE
Smithfield	R.I.	02917	Smithfield	R.I.	02917
	B. NAMI	ES AND ADDR	ESSES OF THE DI	RECTORS	
ECTOR NAME	· •		DIRECTOR NAME	- 	- -
Frank Sle	boda		Nor	J6	
BET ADDRESS			STREET ADORESS		
95 Limero	ck Road				
	STATE	ZIP COOE	QTY	STATE	ZiP C00€
Smithfield	R.I.	02917		l h	
CTOR NAME			DIRECTOR NAME		
Marilyn S	leboda		Nor	ne	
EET ADDRESS			STREET ADDRESS		
95 Limero			····		
	STATE	ZP CODE	. OTY	STATE	7JP C00€
Smithfield	R.I.	02917			ر پید بیاب
· · ·	10. SH	ARES AUTHOR	IZED AND ISSUED		
· ·	AUTHORIZED SHARES	·		ISSUED SHARES	· · · · · · · · · · · · · · · · · · ·
MUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERTES	PAR VALUE
				Common	
2,000 SHS NO	PAR VAL		<u>2,000</u>	No Par Val	_No_Par_Val
			•		1 f
		<u> </u>			
				ļ	1
				<u></u>	<u> </u>

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.

Signature of Officer

Frank Sleboda

Print or Type Name of Officer

President

For Secretary of State Use Only

File Date:

Check No:

Ву:

Title of Officer

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.

2. Name of Corporation

32932

CHESTER'S SERVICE STATION, INC.

3. Street Address Principal Business Office

State

Zip

351 Douglas Pike 4. Business Phone No. (401) 231-9789

S. State of Incorporation

R.I.

02917 6 SIC Code

RHODE ISLAND

3558

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

To conduct the business of a service station & such other business as is usual, 8. NAMES AND ADDRESSES OF THE OFFICERS (*x* BOX FOR ATTACHMENT) proper and necessary in such enterprise. President Name Vice President Name

Frank Sleboda

Street Address

95 Limerock Road

Smithfield

R.I.

02917

None

Street Address

State

Zip

Secretary Name

Marilyn Sleboda

Street Address

95 Limerock Road

Smithfield

State

02917 R.I.

Marilyn Sleboda

Street Address

Smithfield

95_Limerock Road

Smithfield

Director Name

None Street Address

Director Name None

Street Address

State R.I.

02917

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

Director Name

Frank Sleboda

Street Address

95 Limerock Road

City

Smithfield

R.I.

02917

City

State

ZIp

Director Name

Marilyn Sleboda Street Address

95 Limerock Road City

State

20

City

State

Zip

Smithfield 10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

R.I.

02917

AUTHORIZED SHARES Number of Shores

Class/Series

Por Volue

Number of Shares

ISSUED SHARES

Class/Series

Par Value

2,000 SHS NO PAR VAL

2,000

Common

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

No Par Value No Par Value

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

Check No.:

FOR SECRETARY OF STATE USE ONLY

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Frank Sleboda

Print or Type Name of Officer

President

Title of Officer



State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

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

ANNUAL REPORT

Please Type or Print File Annually - Jan. 1 - March 1

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

1995

Smithfield, RI

CITY/STATE

Corporate ID:0032932	A	nnual Repor	t for the year:		
Name of Corporation: CHESTE	R'S SERVICE STATION	, INC.			
Business entity organized under the laws of the			Entity is (check one):		
For foreign entity, address and telephone num		ness Corporation (See RIGL Cha	nter 7-1.1)		
			essional Service Corporation (Sec	-	oter 7-5.1)
N/A		() 11010	was a service of the service (our	02 0112	,
		Brief state	ment of the character of business	conducted i	n Rhode Island:
Phone: ()					
Address and telephone of the principal office of business entity in Rhode			nduct the busines	ss of a	service
Island (Provide street address - Not P.O. Box)	•	statio	on and such other	r busin	iess as
351 Douglas Pike			, proper and nece		
Smithfield, RI 029	17		enterprise.		
Phone: (401) 231-9789	THE NAMES OF TH	E OFFICER	S ARE:		
PRESIDENT	STREET ADDR		СПУ/STATE		ZIP CODE
Frank Sleboda	95 Limerock Ro	oad	Smithfield,	RI	02917
VICE PRESIDENT	STREET ADDR	ESS	CITY/STATE		ZIP CODE
SECRETARY	STREET ADDR	ESS	CITY/STATE		ZIP CODE
Marilyn Sleboda	95 Limerock R	oad	Smithfield,	RI	02917
TREASURER	STREET ADDR	F.S.S	CITY/STATE		7JP CODE
Marilyn Sleboda	Same as Above	•			
	THE NAMES OF THE				
NAME	STREET ADDR		CITY/STATE		ZIP CODE
Frank Sleboda	95 Limerock R	oad	Smithfield,	RI	02917
NAME	STREET ADDR	ESS	CITY/STATE		ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) Number of Shares Class / Series Number of Shares Class / Series 2000 2000 Common Common No Par Value No Par Value

STREET ADDRESS

95 Limerock Road

Marilyn Sleboda

Frank Sleboda

PRINT OR TYPE NAME OF OFFICER SIGNING

Form 31 1/95

TITLE OF OFFICER SIGNING President

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.

FRANK SLEBODA 95 LIMEROCK ROAD SMITHFIELD, RI02917 -- PAID

FEB 17 1995

SECY OF STATE #4475 DA

02917

ZIP CODE

Filing Fee \$50.00 Payable to Secretary of State

PLEASE TYPE or PRINT State of Rhode Island and Providence Plantations

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

Office of The Secretary of State 100 North Main Street

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

	_ Annual Report for the year:	
Name of Business Entity:	CHESTER'S SERVICE STATIO	N, INC.
Business entity organized under the laws of the State of Rhode Islan	d Business Entity is (check one).	
Federal Taxpayer Identification Number	[A] Business Corporation (See RIGL	
For foreign entity, address and telephone number of principal office:	[] Professional Service Corporation [] Limited Liability Company (See	·
	Name, title and mailing address of contact pe	erson to whom
	communications may be directed. Frank Sleboda	
	95 Limerock Road	». — ··-
Phone: ()	Smithfield, R.I. 02917	
Address and telephone of the principal office of business entity in Rhode		
Island (Provide street address - Not P.O. Box):	Brief statement of the character of business of	
351 Douglas Pike	To conduct the business of and such other business as	a service station is usual, proper
Smithfield, RI 02917	and nocessary in such enter	
231-9789	Date of Organization: 1-1-85	
Phone (Date of Qualification to do business in Rhod	e Island (if foreign entity)
THE NAMES OF STREET	THE OFFICERS ARE:	Z PČODE
Frank Sleboda 95 Limerock I	Road Smithfield, R.I.	02917
CHIES OPERATING OFFICER OR VICE PRESIDENT (CHES ON) STREET	ADDRESS CITYATATE	ZIFCODE
CUSTODIAN OF RECORDS OR SECRETARY (Check the) STREET	ADDRESS CITY/STATE	ZIF CODE
Marilyn Sleboda 95 Limerock GREEFENANCAL DIRECTOR STREASCREET GROOM STREET	Rbad Smithfield, R.I.	0.2917 212 COEN
Marilyn Sleboda 95 Limerock R		02917
	THE DIRECTORS ARE:	Z:P COD
Frank Sleboda 95 Limerock R		02917
	Codd Dimitting Code	
NAME STREET	ADDRESS CLEYSTATE	Z.P CCD!
Marilyn Sleboda same as above	ADDRESS CLEYSTATE	Z.P.CODE ZIP.CODE
Marilyn Sleboda same as above street	ADDRESS CHYSTATE ADDRESS CHYSTATE	ZIP COOR
Marilyn Sleboda same as above	ADDRESS CITYSTATE ADDRESS CITYSTATE NUMBER OF SHARES ISSUED AND OUTS	
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Marilyn Sleboda same as above street Marilyn Sleboda for a same as above street NUMBER OF SHARES AUTHORIZED (If Applicable)	ADDRESS CITYSTATE ADDRESS CITYSTATE NUMBER OF SHARES ISSUED AND OUTS	
Marilyn Sleboda same as above STREET Marilyn Sleboda same as above STREET NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER 2000 CLASS Common	ADDRESS CHYSTATE ADDRESS CHYSTATE NUMBER OF SHARES ISSUED AND OUTS' NUMBER 2000 CLASS Common	
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Marilyn Sleboda same as above STREET NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER 2000 CLASS Common SERIES PAR VALUE OR No par value WITHOUT PAR Date Held Street By:	ADDRESS CHYSTATE ADDRESS CHYSTATE NUMBER OF SHARES ISSUED AND OUTS' NUMBER 2000 CLASS Common SERIES PAR VALUE OR No par value	
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Marilyn Sleboda same as above street NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER 2000 CLASS Common SERIES PAR VALUE OR No par value without PAR Date Helf: 5 19 94 By:	ADDRESS CHYSTATE ADDRESS CHYSTATE NUMBER OF SHARES ISSUED AND OUTS' NUMBER 2000 CLASS Common SERIES PAR VALUE OR No par value WITHOUT PAR Frank Sleboda BY TYPENAME OF ORDICAR MIGNING	
Marilyn Sleboda same as above Street NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER 2000 CLASS Common SERIES PAR VALUE OR No par value WITHOUT PAR Date Held 5 19 94 By: SENTE	ADDRESS CHYSTATE ADDRESS CHYSTATE NUMBER OF SHARES ISSUED AND OUTS' NUMBER 2000 CLASS COMMON SERIES PAR VALUE OR NO par value WITHOUT PAR Frank Sleboda BY TYPE NAME OF OPHETER SIGNING President	ZIP COOR

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WAIVER OF NOTICE ANNUAL MEETING BOARD OF DIRECTORS

WE, the undersigned, being all of the Directors CHESTER'S SERVICE STATION, INC. of

a Rhode Island corporation, hereby consent and agree that the annual meeting of the Board of Directors of said corporation may be held on this day at 10:00 A.M. at the prin-Town of Smithfield cipal office of the corporation in the State of Rhode Island, for the transaction of such business as may properly come before said meeting. We hereby waive all other and further notice of the time, place or purpose of said meeting, whether required by statute, the By-Laws of this corporation, or otherwise.

Hank SLEBODA

FRANK SLEBODA

MARILYN SLEBODA

MINUTES

ANNUAL MEETING BOARD OF DIRECTORS

PURSUANT to the foregoing WAIVER OF NOTICE duly executed by all of the Directors of CHESTER'S SERVICE STATION, INC. a Rhode Island corporation, the annual meeting of the Board of Directors of said corporation was held at the principal office of said corporation in Smithfield State of Rhode Island, on this day at 10:00 A.M. All of the Directors were present in person.

The President of the corporation, Frank Sleboda presided over the meeting, and the minutes thereof were recorded by the Secretary of the corporation, Marilyn Sleboda

The President of the corporation submitted to the meeting the annual report of the affairs of the company. The report was discussed in detail, fully approved, and upon motion duly made and seconded, it was unanimously,

RESOLVED: That all of the activities of the officers since the date of the last annual meeting to the date of this meeting be, and the same hereby are, ratified, confirmed, and approved.

The President then stated that the next order of business was the election of officers for the ensuing

After nominations duly made and after balloting thereon, it was unanimously

> RESOLVED: That the following persons be, and they hereby are, elected to the offices set opposite their names, to hold office at the pleasure of the Directors or until their resignation, removal, death, or until their respective successors are duly elected and qualified, viz.:

President: Frank Sleboda Secretary: Marilyn Sleboda Treasurer: Marilyn Sleboda

There being no further business before the meeting, the meeting was adjourned at 11:00 A.M.

Secretary

ATTEST:

Frank Sleboda

State of Rhode Island and Providence Plantations

	100 NO. PROVIDENC	E, RHODE ISLAND 02903	1
orate ID #32932	•••••	/ (N	he year1993
First: The name of	the corporation isCh	ester's Service Station,	Inc.
		Rhode Island	
		is to conduct the busines, proper and necessary i	
FOURTH: If foreign o		s principal office	
FIFTH: Business add	····	381 Douglas Pike Smithf	
SIXTH: Names and a	ddresses of its directors		(Attach rider if necessary) g number, street, up code)
Frank Sleboda	Director	95 Limerock Road S	mithfield, RI 02917
Marilyn Sleboda	Director	same as above	
······································	Director		
	Presiden		
	Vice Pre	sident	
Marilyn Sleboda	Secretar	y same as above	
Marilyn Sleboda	Treasure	same as above	
SEVENTH: Number	of Shares authorized:		Par Value or statement that shares are thout
No. of Shares	Common	Senies	No par:valüe:
EIGHTH: Number of	f Shares issued:	Series	Par Value or statement that shares are without par value
2000	Common	r .	No par value
ted March	1.12., 19 <u>93</u>	CHESTER'S SERVICE STATE (Name of Corporation) By Hame Slebtel PRESIDENT	FRANK SLEBODA

(Report must be signed by an officer)

State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID003293	32	Annual Report for the	he year1992
FIRST: The name of	of the corporation is	THESTER'S SERVICE STATION	N, INC.
Second: It is income	rporated under the laws of	Rhode Island	
THIRD: Character of	of business, briefly stated, is	to conduct the business	of a service station
and such o	other business as is us	sual, proper and necessar	y in such enterprise.
FOURTH: If foreign	corporation, address of its p	orincipal officeN/A	1
FIFTH: Business ad	dress in Rhode Island		
SIXTH: Names and	addresses of its directors and		(Attach rider if necessary)
Frank Sleboda	Director	328 Limerock Road	l, Smithfield, RI 02917
Marilyn Sleboda	Director	328 Limerock Road	l, Smithfield, RI 02917
	Director		
Frank Sleboda	President	328 Limerock Road	, Smithfield, RI 02917
Frank Sleboda	Vice Presid	ent As Above	•••••••••••••••••••••••••••••••••••••••
George M. Presco	ott Secretary	300 Front St., P.	O. Box A, Lincoln, RI 02865
Marilyn Sleboda	Treasurer	328 Limerock Road	, Smithfield, RI 02917
	of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
2000	Common	PAID	No par value
Eighth: Number of	of Shares issued:	FEB 2 8 1992	Par Value
No. of Shares	Class	SEC'Y OF STATE	or statement that shares are without par value
2000	Common	5511.6.	No par value
Dated February 2	. 1	By Franks do	SERVICE STATION, INC.
(Report must be	signed by an officer)	Title President	***************************************

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE. RHODE ISLAND 02903

Corporate ID 0032932		Annual Report for t	he year 1991
FIRST: The name of the	corporation isCHE	STER'S SERVICE STATION,	INC.
Second: It is incorpora	ated under the laws of	Rhode Island	
THIRD: Character of bu	siness, briefly stated, is	to conduct the business	s of a service station
and such other busin	ness as is usual, p	proper and necessary in s	such enterprise.
FOURTH: If foreign corp			
FIFTH: Business address	,		
SIXTH: Names and add	resses of its directors an		(Attach rider if necessary)
Frank Sleboda	Director	328 Limerock Rd., Smi	thfield, RI 02907
Marilyn Sleboda	Director	same	
	Director		
Frank Sleboda	President	328 Limerock Rd., Smi	thfield, RI 02907
Frank Sleboda	Vice Presid	dent same	
George M. Prescott	Secretary	300 Front St., Lincol	
Marilyn Sleboda	Treasurer	328 Limerock Rd., Smi	thfield, RI 02907
SEVENTH: Number of S	hares authorized:		Par Value
No of Shares 2000	Class common	Series PAID	or statement that shares are without par value No par value
EіGнтн: Number of Sh	ares issued:	SEP 05 1991 SEC'Y OF STATE	Par Value or statement that shares are without
No. of Shares 2000	Class COMMON	Series	par value No par value
Dated August 30,	19 91	CHESTER'S SERVICE S (Name of Corporation) By	tation, inc.
(Report must be signed	l by an officer)	Title President	

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

		PROVIDE	NCE, RHOE	E ISLAND	02903			#1	l
Corporate ID.	0032932			An	nual Report	t for the y	/ear	1990	
First:	The name of the c	orporation is	CHEST	ER'S S	ERVICE S	TATION	, INC	•	
•••••		•••••		······································		• • • • • • • • • • • • • • • • • • • •	••••••••••••••••••••••••••••••••••••••	••••	
SECOND:	It is incorporate	d under the laws	ofRho	ode Is	land	************	•••••	•••••	•••••
THIRD:	Character of busi	ness, briefly state	d, is to	condu	ct the b	usines	sof	a servi	.ce
station	and such ot								
enterpr Fourth:	If foreign corpo	ration address o	f its princ	inal offic	e N/A				
	n totolgh volpo								
FIFTH:	Business address i	n Rhode Island	*******************************	•••••	******************		************	••••••	
2 31 411.	Dustrices address in	i Riiodo Island		•••••	*******************		*************	•••••••	
Ѕіхтн:	Names and addre	sses of its directo	rs and of	ficers:			(A)	tach rider if	necessary)
2	Name		Office		Address (i	ncluding num	•		,,,
Frank S	leboda	Direc	tor	328 L	imerock	Road,	Smith	field,	RI 02907
Marilyn	Sleboda	Direc	tor	328 L	imerock	Road,	Smith	field,	RI 02907
		Direc	tor			••••		•••••	
Frank S	leboda	Presid	lent	328 L	imerock	Road,	Smith	field,	RI 02907
Frank S	leboda	Vice 1	President	328 L	imerock	Road,	Smith	field,	RI 02907
John H.	Hines, Jr.	Secre	tary	496 P	utnam Pi	.ke, Gı	reenvi	lle, RI	02828
Marilyn	Sleboda	Treas	urer	328 L	imerock	Road,	Smith	field,	RI 02907
Seventh	: Number of Sha	ares authorized:				•		Pai ai a	2
No. of Sha	ıres	Class			Series			statement that ires are without par value	
2000		Common	•				N	o par v	/alue
					PA	ID			
Еіснтн:	Number of Shar	es issued:			FEB 2	8 1990	or	Par Value statement that	
No. of Sha	ares	Class			Series .	T STA		res are without par value	
2000		Common			•		N	o par v	alue
n . Mala	1.2	00		undan	te eppu	CP CM	N M T O NI	TNC	
Dated Feb	ruary 12,	19	*****	ne of Corpor	S SERVI	LCE SIA	ATTON,	INC.	
			Ву	\mathcal{M}	ious &	llebol	¢		
				-			- -		

Title President

(Report must be signed by an officer)

Form 31 1/85

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

ordorate 10	32932	Annual Report for the y	/ear
First: The name	of the corporation is	CHESTER'S SERVICE S	TATION, INC.
SECOND: It is inco	orporated under the laws of	RHODE ISLAND	
THIRD: Character	of business, briefly stated, i	s to conduct the business of	of a service station
and such other	business as is usual	, proper amd necessary in suc	ch enterprise.
FOURTH: If foreign	n corporation, address of its	s principal officeN/A	
FIFTH: Business ac	dress in Rhode Island		
SIXTH: Names and	l addresses of its directors a		(Attach rider if necessary
FRANK SLEBODA	Director	328 Limerock Road. Sm	aithfield, R.I. 0290
MARILYN SLEBODA	Director	н	lt
••••••	Director		
FRANK SLEBODA	President	11	11
FRANK SLEBODA	Vice Pres	sident	11
JOHN H. HINES, J	IR. Secretary	41 Roger Williams Dri	ve. Smithfield, R. I
MARILYN SLEBODA	Treasurer	328 Limerock Road. Sm	uithfield, R.I. 0290
SEVENTH: Number	of Shares authorized:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
2000	Common	PAID	No par value
		FEB 2 (1989	
EIGHTH: Number of	of Shares issued:	SEC'Y OF STATE	Par Value or statement that \(\chi\) shares are without
No. of Shares	Class	Series	par value
	Common		No par value
ated February 17,	1989	CHESTER'S SERVICE STATIO (Name of Corporation) By Hourk Sliberta	N, INC.
(Report must be	signed by an officer)	Title PRESIDENT	

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations Office of the secretary of state

	Character of busin	ess, briefly sta	ated, is To con	DE ISLAND duct the business of a seary in such enterprise
Fourth:	If foreign corpo	ration, addre	ess of its princip	pal office N/A
Fifth:	Business address i	n Rhode Isla	nd	
Sixth:	Names and address			cers:
N	me O	fice		Address
FRANK SLEBO	DA I	Director 328	Limerock RD.,	Smithfield, R.I. 0291
MARILYN SLE	BODA	Director	fi	tt
aqpaqupalar-rivbilisiis Bidiv i	I	Director		
FRANK SLEBO	DA I	President	***************************************	
FRANK SLEBO	AC AC	Vice President	t"	11
ЈОНИ Н. НІК	ES, JR.	Secretary	41 Roger Wil	liams Dr., Smithfield,
MARILYN SLE If additional eg	BODA needed, attach		328 Limerock	Rd., Smithfield, R.I.
Seventh:	Number of Sh	ares authoriz	ed:	Par Value or statement that
No. of Shar	ra Cla	183	Series	shares are without par value
2000	Сопи	oon		No Par Value
Еіснтн :	Number of Sha	res issu ed:		Par Value or statement that
No. of Shar	es Cl	A68	\$eries	shares are without par value
	Сощи	on'		No Par Value
2000				

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

SECOND: It is incorpo	rated under the laws of	Rhode Island	
THIRD: Character of b	ousiness, briefly stated, is	To conduct the busine	ss of a service station
and such other bu	siness as is usual, p	oroper, and necessary	in such enterprise.
FOURTH: If foreign co	orporation, address of its pi	rincipal office	
FIFTH: Business addre	ss in Rhode Island		
SIXTH: Names and ad	dresses of its directors and		(Attach rider if necessa
FRANK SLEBODA	Director	328 Limerock RD.,	Smithfield, RI 02917
MARILYN SLEBODA	Director	11	11
•••••••••••	Director		
FRANK SLEBODA	President		11
FRANK SLEBODA	Vice Preside		11
JOHN H. HINES, JR	Secretary	41 Roger Williams D	r., Smithfield, RI
MARILYN SLEBODA	Treasurer	328 Limerock Rd., S	mithfield, RI
SEVENTH: Number of	Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
2000	Common	PAID	No par value
Еіднтн: Number of S	Shares issued:	PAID MAR 6 1987 SEC'Y OF STATE	Par Value Par Value or statement that
No. of Shares	Class	Series STATE	shares are without par value
2000	Common	•	No par value
		CHESTER'S SERVICE STAT	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MAIL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 32932		Annual Report	for the year 1986		
FIRST: The name of the corporation is CHESTER'S SERVICE STATION, INC.					
SECOND: It is incorpor	ated under the laws of	Rhode Isla	nđ		
THIRD: Character of b	usiness, briefly stated, is	To conduct the busin	ess of a service station		
and such other	business as is usual	l, proper, and neces	ssary in such enterprise.		
FOURTH: If foreign cor	poration, address of its pr	incipal office			
Fifth: Business addres	s in Rhode Island42	2 Weybosset St. Suit	e 400, Providence, RI 02903		
SIXTH: Names and add	resses of its directors and		(Attach rider if necessary)		
FRANK SLEBODA	Director	328 Limerock Rd.	Smithfield, RI 02917		
MARILYN SLEBODA	Director	11	11		
	Director				
FRANK SLEBODA	President	n	n		
			n		
	Secretary		s.Dr.,.Smithfield,.RI		
MARILYN SLEBODA	Treasurer	328LimerockRD.			
SEVENTH: Number of S	Shares authorized:	DEC. BIRICA OUR OF	Par Value		
No. of Shares	Class	Series	or statement that shares are without par value		
2000	Common		no par value		
EIGHTH: Number of Si	Class P	Series	Par Value or statement that shares are without par value no par value		
2000	Common 🛱		no par varue		
Dated February 17 MAR 22		CHESTER'S SERVICE S Name of Corporation) y LOW JOHNSON	STATION, INC.		
(Report must be signe	d by an officer	itle President	······································		