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File Date

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FOR SECRETA

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

FORM MUST BE TYPED II I. Corporate ID No.	2. Name of Corpo	ration					
119543		ting Service, Inc					
3. Street Address Principal Bi	usiness Office		Cuy	State	Zip		
92 HIGH STREET			JAMESTOWN	RI	02835-		
J. Business Phone No.		5. State of Incorpore			6. SIC Code		
4014239276		RHODE ISLA	ND		232		
7. Brief Description of the Ch TO MAINTAIN, INSTI	haracter of Business Con ALL AND REPAIR	ducted in Rhode Island HEATING SYSTEMS					
8 NAMES AND ADDRI	ESSES OF THE OF	ICERS ("X" BOX FOR	ATTACHMENT FILL IN SI	ACES BEFORE USING A	TTACHMENTS		
Elliott E. Brown	ı		Denise Brown				
Street Address			Sireet Address	* · · · · · · · · · · · · · · ·			
92 High Street			. 92 High Street				
Cdy	State	Zıp	City	State	Zip		
Jamestown	RI	02835	. Jamestown	RI	02835		
ecretary Name	· · · · · · · · · · · ·	• • •' • • • • • • • • • • • • • • • •	Tréasurer Name	• • • • • • • • • • •			
Sircet Address		·	· Street Address				
City	State	Zıp	City	State	Zıp		
9. NAMES AND ADDRI Ourector Name Elliott E. Brown		ECTORS ("X" BOX FO	PRATTACHMENT) FILL IN Director Name	SPACES BEFORE USING	ATTACHMENTS		
Street Address			Street Address				
92 High Street			•				
City	State	:Zip	·City	State	Zip		
Jamestown	į R I	02835	•	I	Z ⁱ p		
Director Name		• • • • • • • • • • • • • • • • • • •	Director Name				
Street Address		· Street Address					
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illy	State	Zip	City	State	Zip		
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10. SHARES AUTHORI UTHORIZED SHARES	ZED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED (*)	"BOX FOR ATTACHMEN	70 D 77 H 2 M 2		
Sumber of Shares	Class/Series	Par Value	Number of Shares	Closs/Series	Par Value		
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his report must be sign	ned in ink by eithe	er the President, Vice	President, Secretary, Assi.	stant Secretary, Treas	urer, Receiver or Truste		
81 1/822 1 /1 18 1	IBKAL BUNLALARA IN		•				
1 1 9	5 4 3		Under penalty of per	rjury, 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.

Form 630 12/01

Elliott E. Brown
Print or Type Name of Officer

President

Title of Officer



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) IN BLACK)	7 ming 7 cc. 250.00				
1. Corporate ID No.	2. Name of Cor			······································		
119543	l l	ating Service, Inc				
3. Street Address Principal			Cirv	State	Zip	
92 HIGH STREET		JAMESTOWN	RI	02835-		
4. Business Phone No. 5. State of Incorpor		5. State of Incorpore	ntion		6. SIC Code	
4014239276		RHODE ISLA	ND		232	
7. Brief Description of the TO MAINTAIN, INS	Character of Business C	onducted in Rhode Island R HEATING SYSTEMS				
8. NAMES AND ADD	RESSES OF THE O	FFICERS ("X" BOX FOR	ATȚACHMENT) 🗆 FILI, IN S	PACES BEFORE USING A	TTACHMENTS	
Elliott E. Brov	an		Vice President Name			
Street Address			Denise F. Brown Street Address			
92 High Street			•	_		
			.92 High Street			
Ciry Jamestown	State RI	Zip	City	State	Zip	
Secretary Name		02835	- Jamestown ************************************	RI	02835	
			reasurer name			
Street Address		· · · · · · · · · · · · · · · · · · ·	'Sireei Address			
			•			
City	State	Zip	*Citv	State	Zip	
			• '			
9. NAMES AND ADDI	RESSES OF THE D	RECTORS ("X" BOX FO	RATTACHMENT) FILL IN	SPACES BEFORE USING	ATTACHMENTS	
Elliott E. Brow	٧n		Director Name			
Street Address			Sireei Address			
92 High Street			• Sireci Address			
City	State	Zip	·Cin	State		
Jamestown	RI	02835	.C.ii.	State	Zıp	
Director Name			Director Name		J	
			•			
Street Address			· Sireei Address			
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City	State	Zip	·Cin·	State	Zip	
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rma report must be st	gnea in ink by ca	ner the Frestaent, vice	President, Secretary, Ass	isiani Secretary, Treas	urer, Receiver or Trustee	
	a iaiai akii sissa iii					
	8 8 8 8 1 1 1 1 1 1					
1 1	9 5 4 3		Under penalty of p	erjury, I declare and affirm	that I have examined	
				ng any accompanying sche		
*119543 DBC 02/09	9/04 06:19:42 PM	•		ents contained herein are tr		
1 20 M						
File Date	<u>'01</u>	<u> </u>		E Brown	2-23-04	
Check No.) (0 (0	()		Signature of Officer		Date	
Check No. (U.U.U)		-	Elliott E. Brown			
			Peint or Type Name of Officer			
•——•	THE LIBE CALL	-	President			
FOR SECRETARY OF STATE USE ONLY			Title of Officer Form 630 12			



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

r uing Periou: Junuary (FORM MUST BE TYPED I		rung ree: \$50.00				
1. Corporate ID No.	2. Name of Cor		·	·	<u> </u>	
119543	•	ating Service, Inc				
3. Street Address Principal E	lusiness Office		City	State	Zip	
92 HIGH STREET		JAMESTOWN	RI	02835-		
4. Business Phone No.		5. State of Incorpora			6. SIC Code	
4014239276	 	RHODE ISLA	ND		232	
7. Brief Description of the C TO MAINTAIN, INST	haracter of Business C ALL AND REPAIL	onducted in Rhode Island R HEATING SYSTEMS		-		
8 NAMES AND ADDR	ESSES OF THE O	FFICERS CX" BOX FOR	<i>attachment</i>) 🗆 fille in s	PACES BEFORE USING	PATTACHMENTS SOATES	
cresiveni Name			Vice President Name			
Elliott E. Brown Street Address		Denise F. Brown				
92 High Street			Street Address		<u>-</u>	
City	State	Zip	.92 High Street			
Jamestown	RI	02835	City Jamestown	State RI	2 <i>t</i> ρ	
Secretary Name			Treasurer Name		02835	
Denise F. Brown			Elliott E. Bro	wn		
Street Address			* Street Address			
			•			
City	State	Zip	*City	State	Zip	
			• '		٦٠	
9. NAMES AND ADDR Director Name	esses of the di	RECTORS ("N" BOX FO	RATTACHMENT) ☐ FILL IN	SPACES BEFORE USL	NG ATTACHMENTS	
Director Name			Director Name			
Elliott E. Brown	1		•			
Street Address			· Street Address	······································		
92 High Street			•			
City	State	Zip	·City	State	Zíp	
Jamestown Director Name	JRI	02835	•			
Director Name			Director Name			
Street Address						
Sireel Address			·Street Address			
City	State	Zip	Lity	State	17/n	
•	İ	2.7	•	State	Zip	
10. SHARES AUTHOR	IZED CX" BOX FO	RATTACHMENT []	11 SHADES ISSUED (*	Y" PON FOR 4774 CHA	(EAST)	
10. SHARES AUTHORIZED, CX" BOX FOR ATTACHMENT) AUTHORIZED SHARES		11. SHARES ISSUED ("X" BOX FORATTACHMENT) ISSUED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
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1,000 NO PAR VALU	E		one		no par	
						
					}	
This report must be sig	ned in ink by eith	her the President, Vice	President, Secretary, Assi	istant Secretary Tree	asurer Receiver or Truct	
			,		asa, cr, receiver (), 17431	
* 1 '	1 9 5 4 3	•	Under penalty of pe	rjury, I declare and affin	m that I have examined	
*****	14.55		this report, including	g any accompanying sc	hedules and statements,	
**119543* 2/27/0	RLEED		uno inai an statemen	nts contained herein are	true and correct.	
File Date		[GOLLIT	مهر مديد	3-6-03	
MAR	R 2 0 2003		Signature of Officer	- runn	Date U_	
Check Na		Elliott E. Brown				
By (OM 13-	ا ل	Frint or Type Name of			
Ву:		_'	President	· • · · · ·		
FOR SECRETARY OF STATE USE ONLY			Total City			
		1	THE OF OTHER		Form 620 120	

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

STOP PLEASE READ INSTRUCTIONS

riting Perioa: Januar	y 1-March 1 •	Filing Fee: \$50.00			INSTRUCT
(FORM MUST BE TYPED IN BL	ACK)				
1. Corporate ID No.	2. Name of Corpor	ation			
119543	Elliott's Hea	iting Service, Inc			
3. Street Address Principal Busines		•	City	State	Zip
92 HIGH S	TREET		JAMESTOWN	RI	02835
4. Business Phone No.		5. State of Incorporation			6. SIC Code
423-9276		RHODE ISLAND			0537
7. Brief Description of the Charact	er of Business Conducted	in Rhode island			
heating sy 8. NAMES AND ADDRE President Name	ystem insta SSES OF THE OFF	llation & repairers (*x* BOX FOR ATTACK	ir HMENT) FILL IN SPACES B Vice President Name	EFORE USING ATTA	CHMENTS
ELLIOTT E	. BROWN		DENISE F. 1 Street Address	BROWN	
92 HIGH S	TREET		92 HIGH ST	REET	
City	State	Zip	City	State	Zip
JAMESTOWN	RI	02835	JAMESTOWN	RI	02835
Secretary Name		• • • •	Treasurer Name	•	•
DENISE F.			ELLIOTT E.	BROWN	
92 HIGH S	Т.,		Street Address HIGH STI	REET,	
JAMESTOWN	staff I	^{2ip} 02835	JAMESTOWN	¥i	²′₀02835
9. NAMES AND ADDRE	SSES OF THE DIR	ECTORS ("X" BOX FOR ATTA	ACHMENT) FILL IN SPACES Director Name	BEFORE USING AT	TACHMENTS
ELLIOTT E	BBOWN		Director Name		
Street Address	. DROWN		Street Address		
	STREET		SHEEL MUDIESS		
City	State	Zip	City	State	Zip
JAMESTOWN	RI	02835	G.I.y	J	<i>7.1</i> 4
Director Name			Director Name	•	
Street Address			Street Address		
Сиу	State	Zip	City	State	Zip
10. SHARES AUTHORIZI	ED (*x* box for att	ACHMENT)	11. SHARES ISSUED (*X	* BOX FOR ATTACHMEN	(דו
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value
1,000 NO PAR VALUE					
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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	3.25.02	
File Date:	1084	
Check No.:		
By:	<u>a</u>	
FOR SECRETA	RY 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.

that all statements contained herein are true	and correct.
Ellitt & Brown	2-15-0
Elliott E Brown	Date
Print of Type Name of Officer President	
Title of Officer	

Form 630 12/01