

State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

FILED

JAN 22 2020

BY 30631 DSAnnual Report for the year: 2020  
Corporation

- Filing period: January 1 - March 1  
 → Filing Fee: \$50.00  
 → Penalty: Additional \$25.00 fee if form is not filed by April 1

1. Entity ID Number <b>55778</b>		2. Exact name of the Corporation <b>Summit Heating Service, Inc.</b>												
3. Principal Office Address <b>394 Mishnock Road</b>			City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>									
4. NAICS Code <b>23 - Construction</b>		6. Brief description of the character of business conducted in Rhode Island <b>Service to heating plants and sales</b>												
5. State of Incorporation <b>RHODE ISLAND</b>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <b>James W. Halpin</b>			Vice-President Name <b>None</b>											
Street Address <b>394 Mishnock Road</b>			Street Address											
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City	State	Zip									
Secretary Name <b>James W. Halpin</b>			Treasurer Name <b>James W. Halpin</b>											
Street Address <b>394 Mishnock Road</b>			Street Address <b>394 Mishnock Road</b>											
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>									
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <b>James W. Halpin</b>			Director Name <b>None</b>											
Street Address <b>394 Mishnock Road</b>			Street Address											
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City	State	Zip									
Director Name <b>None</b>			Director Name <b>None</b>											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>400</b></td> <td><b>Common</b></td> <td><b>No Par</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>400</b>	<b>Common</b>	<b>No Par</b>			
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<b>400</b>	<b>Common</b>	<b>No Par</b>												
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <i>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.</i>														
Name of Authorized Representative <b>James W. Halpin, President</b>				Date <b>1/7/2020</b>										
Signature of Authorized Representative 				SIGN DOCUMENT HERE										

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov