



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 IN BLACK)

1. Corporate ID No. 115753		2. Name of Corporation Northeast Home & Energy, Inc.			
3. Street Address Principal Business Office 21 NORTH MAIN STREET			City NORTH GRAFTON	State MA	Zip 01536-
4. Business Phone No. 5088397001		5. State of Incorporation MASSACHUSETTS		6. SIC Code 34	
7. Brief Description of the Character of Business Conducted in Rhode Island HOME IMPROVEMENT AND REMODELING					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard Prunier			Vice President Name none		
Street Address 115 Sycamore Drive			Street Address		
City Holden	State MA	Zip 01520	City	State	Zip
Secretary Name Richard Prunier			Treasurer Name Richard Prunier		
Street Address same			Street Address same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Richard Prunier			Director Name		
Street Address same			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
15,000	COMM NO PAR VALUE		100	common	no par value

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



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FILED
115753 FBC 03/03/05 06:27 PM
File Date MAR 14 2005
Check No. By 115
By _____
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 statements contained herein are true and correct.

Richard Prunier 3/10/05
Signature of Officer Date
Richard Prunier
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED IN BLACK)

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4. Business Phone No. 5088397001		5. State of Incorporation MASSACHUSETTS		6. SIC Code 34	
7. Brief Description of the Character of Business Conducted in Rhode Island HOME IMPROVEMENT AND REMODELING					
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Street Address 115 Sycamore Drive			Street Address		
City Holden	State MA	Zip 01520	City	State	Zip
Secretary Name Richard Prunier			Treasurer Name Richard Prunier		
Street Address same			Street Address same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS.					
Director Name Richard Prunier			Director Name		
Street Address same			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
15,000	COMM NO PAR VALUE		100	common	no par value

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



1 1 5 7 5 3

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.

Richard Prunier 2-25-04
Signature of Officer Date

Richard Prunier
Print or Type Name of Officer

President
Title of Officer

115753 FBC 02/23/04 01:52:18 PM
File Date 3-1-04
Check No. 9440
By [Signature]
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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 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *115753*		2. Name of Corporation Northeast Home & Energy, Inc.			
3. Street Address Principal Business Office 21 NORTH MAIN STREET			City NORTH GRAFTON	State MA	Zip 01536-
4. Business Phone No. 5088397001		5. State of Incorporation MASSACHUSETTS			6. SIC Code 34
7. Brief Description of the Character of Business Conducted in Rhode Island HOME IMPROVEMENT AND REMODELING					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard Prunier			Vice President Name none		
Street Address 115 Sycamore Drive			Street Address		
City Holden	State MA	Zip 01520	City	State	Zip
Secretary Name Richard Prunier			Treasurer Name Richard Prunier		
Street Address same			Street Address same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Richard Prunier			Director Name		
Street Address same			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
15,000	COMM NO PAR VALUE		100	common	no par value

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



* 1 1 5 7 5 3 *

**115753* 2/23/03 2:25:03 PM*

File Date 015/03

Check No. 8921

By [Signature]

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 statements contained herein are true and correct.

Richard Prunier 3-3-03

Signature of Officer Date

Richard Prunier

Print or Type Name of Officer

President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **115753** 2. Name of Corporation **Northeast Home & Energy, Inc.**

3. Street Address Principal Business Office **21 North Main Street** City **North Grafton** State **MA** Zip **01536**

4. Business Phone No. **(508) 839-7001** 5. State of Incorporation **MASSACHUSETTS** 6. SIC Code **0034**

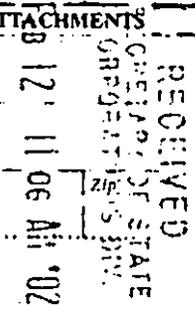
7. Brief Description of the Character of Business Conducted in Rhode Island
home improvement and remodeling

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

President Name Richard Prunier Street Address 115 Sycamore Drive City Holden State MA Zip 01520	Vice President Name none Street Address City State Zip
Secretary Name Richard Prunier Street Address same City State Zip 	Treasurer Name Richard Prunier Street Address same City State Zip

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

Director Name Richard Prunier Street Address same City State Zip 	Director Name Street Address City State Zip
Director Name Street Address City State Zip 	Director Name Street Address 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
15,000	COMM NO PAR VALUE		100	common	no par value

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

* 1 1 5 7 5 3 *

FILED

File Date: **FEB 12 2002**

Check No.: **By GMA 581573**

By: _____

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.

Richard Prunier 2-8-02
Signature of Officer Date

Richard Prunier
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 115753		2. Name of Corporation Northeast Home & Energy, Inc.			
3. Street Address Principal Business Office 21 North Main Street			City North Grafton	State MA	Zip 01536
4. Business Phone No. (508) 839-7001		5. State of Incorporation Massachusetts		6. SIC Code 0034	
7. Brief Description of the Character of Business Conducted in Rhode Island home improvement and remodeling					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard Prunier			Vice President Name none		
Street Address 115 Sycamore Drive			Street Address		
City Holden	State MA	Zip 01520	City	State	Zip
Secretary Name Richard Prunier			Treasurer Name Richard Prunier		
Street Address same			Street Address same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Richard Prunier			Director Name		
Street Address same			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
15,000	common	no par value	100	common	no par value

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.

Richard Prunier 10/23/01
Signature of Officer Date

Richard Prunier

Print or Type Name of Officer

President

Title of Officer

File Date: 10-26-01

Check No.: 9735

By: *[Signature]*

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