

FOR SECRETARY OF STATE USE ONL

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

401.222.3010

2005 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_ Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2. Name of Corporation 105261 SCITUATE FUEL ISLAND INC. 3 Street Address Principal Business Office State City 1375 Warwick Avenue Warwick RI 02888 4. Business Phone No. 5. State of Incorporation 6. SIC Code 0 **RHODE ISLAND** 401-463-5600 7. Brief Description of the Character of Business Conducted in Rhode Island
TO SELL AT WHOLESALE OR RETAIL FUEL OIL OR IN ANY MANNER DEAL IN PETROLEUM PRODUCTS, HEATING. MANUFACTURING. 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Barbara A. D'Allesandro Donna Rescio Street Address Street Address 90 Peeptoad Road 6 Heath Street State N. Scituate | RI | 02857 Johnston 02919 Secretary Name Treasurer Name Barbara A. D'Allesandro <u>Walter Karspeck</u> Street Address Street Address 90 Peeptoad Road 26 Greenhill Road State RI 02857 RI 02919 N. Scituate Johnston Director Name Barbara A. D'Allesandro Donna Rescio Street Address Street Address <u>As above</u> As above State Zip City Director Name Director Name <u>Dianna Aguiar</u> Street Address <u> 105 Charlotte Drive</u> State City State Zip Warwick RI02886 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)  $\Box$ 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 1,000 COMM NO PAR VALUE 500 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. Signature of Officer Barbara A. D'Allesandro Print or Type Name of Officer

President

Title of Officer



# 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 \_\_\_\_\_ 2004

1375 Warwick Avenue Warwick RI	цр
3. Street Address Principal Business Office City State Z. 1375 Warwick Avenue Warwick RI	·
1375 Warwick Avenue Warwick RI	·
A D C C C C C C C C C C C C C C C C C C	<u> 02888                                  </u>
	. SIC Code
401-463-5600 RHODE ISLAND  7. Brief Description of the Character of Business Conducted in Rhode Island	0
TO SELL AT WHOLESALE OR RETAIL FUEL OIL OR IN ANY MANNER DEAL IN PETROLEUM PRODUCTS, HEATING, MANUFACTURING.  8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENT    1. Vice President Name	ACHMENTS
Barbara A. D'Allesandro Donna Rescio:  Sireci Address Sireci Address	
90 Peeptoad Road 6 Heath Street	
	<del></del>
N. Scituate RI 02857 Johnston RI	02919
Secretary Name Barbara A. D'Allesandro  Treasurer Name Walter Karspeck	
Street Address Street Address	<del></del>
90 Peeptoad Road 26 Greenhill Road	
N. Scituate RI Zip City State RI 02857 Johnston RI	02919
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING AT	h
Director Name Director Name	TACILLE IVIS
Barbara A. D'Allesandro Donna Rescio	Ì
Street Address Street Address	
As above As above	
City State Zip City State Zi	(p
Director Name Director Name	
Sirect Address 105 Charlotte Drive	
	ip
Warwick RI 02886	· <b>'</b>
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) [ 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT	n
AUTHORIZED SHARES ISSUED SHARES	
Number of Shares Class/Series Par Value Number of Shares Class/Series I	Par Value
1,000 COMM NO PAR VALUE 500 Common No	o Par Value
This report must be signed in into business the Durit Law 2011 and Dur	
This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Received	ver or Trustee
[	
Under penalty of perjury, I declare and affirm that I have	ve examined this report
* 1 0 5 2 6 1 * including any accompanying schedules and statements	s, and that all statement
contained herein are true and correct.	2/26/04
File Date	Date
Check NoOU/	
Barbara A. D'Allesandro  Print or Type Name of Officer	<u>-</u>
By: President	
FOR SECRETARY OF STATE USE ONLY  Title of Officer	<del></del>

Scituate Fuel Island, Inc.. ID No: 105261

8. Cont'd.

Assistant Treasurer: Dianna Aguiar

105 Charlotte Drive Warwick, RI 02886

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

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

3. Street Address Principal Business Office

SCITUATE FUEL ISLAND INC.

1375 Warwick Avenue

5. State of Incorporation

Warwick

State

RI

02888

4. Business Phone No. 401-463-5600

6. SIC Code

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

sell at wholesale or retail fuel oil or in any manner deal in petroleum products

**RHODE ISLAND** 

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

President Name

Barbara A. D'Allesandro

Street Address

90 Peeptoad Road

Street Address 6 Heath Street

N. Scituate

02857

Johnston

Donna Rescio

02919

Secretary Name Barbara A. D'Allesandro

Street Address

90 Peeptoad Road

N. Scituate

RI

02857

Street Address

Treasurer Name

26 Greenhill Road

Walter Karspeck

RI

02919

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

Barbara A. D'Alleandro

Street Address

City As above

Zip

Donna Rescio

Street Address

Director Name

Street Address

As above

Johnston

State

Director Name

Dianna Aguiar

Street Address

105 Charlotte Drive

City

City

State

Warwick 10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

RT

Class/Series

02886

Par Value

Zip

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ESSLIED SHARES

Number of Shares

Class/Series

Par Value

1,000 COMM NO PAR VALUE

500

Common

No Par Value

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



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.

Barbara A. D'Allesandro

Print or Type Name of Officer

Prêsident

Title of Officer

Farm 630 12/02

Scituate Fuel Island, Inc.. ID No: 105261

8. Cont'd.

Assistant Treasurer: Dianna Aguiar

105 Charlotte Drive Warwick, RI 02886

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

2002 STOP

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 105261 SCITUATE FUEL ISLAND INC. 3. Street Address Principal Business Office State 1375 Warwick AVenue Warwick RI 02888 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-463-5600 **RHODE ISLAND** ٥ 7. Brief Description of the Character of Business Conducted in Rhode Island sell at wholesale or retail fuel oil or in any manner deal in petroleum products 8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS : Vice President Name Barbara A. D'Allesandro Donna Rescio Street Address 90 Peeptoad Road Heath Street Zip City Zip .02857 .... North Scituate RI 02919 Johnston RI Secretary Name Treasurer Name Barbara A. D'Allesandro Walter Karspeck Street Address Street Address 90 Peeptoad Road 26 Greenhill Road State Scituate RI 02857 02919 Johnston RI9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Dianna Aguiar Donna Rescio Street Address Street Address 105 Charlotte Drive 6 Heath Street City Zip City State Zip Warwick RΙ .02886 RI Johnston 02919 Director Name Director Name Barbara A. D'Allesandro 90 Peeptoad Road Zip City Zip N. Scituate RI 02857 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 1,000 COMM NO PAR VALUE 500 Common No Par Value

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

Title of Officer



File Date:	2.28.02	
Check No.: _	1497	
Ву:	Km	
FOR SECRET	TARY 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 schements contained herein are true and correct.

Signature of Officer	all	Land 2	120	10 Z	
Signature of Officer			Date	,	

, .,	37414
— Barbara A-	D'Allesandro
Print or Type Name of Officer	5 MITCSANGIO
President_	

Form 630	12/01

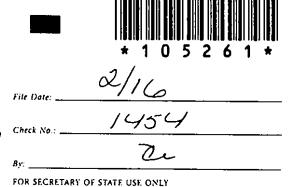
Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

ining serious junuary 1-multin 1	•	riting ree: \$30.00	
(FORM MUST BE TYPED IN BLACK)			

1. Corporate ID No. 105261	2. Name of Corpore SCITUATE	<sup>ntion</sup> FUEL ISLAND INC	· •			
3. Street Address Principal Busines	s Office		City	State	Zip	
1375 Warwick A	venue	5. State of Incorporation		RI	02888 6. SIC Code <b>0</b>	
401-463-5600		RHODE ISLA	ND		U	
7. Brief Description of the Charact				_		
			any manner deal i (CHMENT) XFILL IN SPACES Vice President Name			
Barbara A. D'A	llesandro		Donna Rescio			
Street Address			Street Address			
90 Peeptoad Ro	ad		6 Heath Stre	et		
City	State	Zip	City	State	ZIp	
N. Scituate	RI	02857	Johnston	RI	02919	
Secretary Name		•	Treasurer Name	•	•	
Barbara A. D'A	llesandro		Walter Karsp	eck		
Street Address			Street Address			
90 Peeptoad Ro	oad		26 Greenhill	Road		
City	State	Zip	City	State	Zip	
N. Scituate	RI	02857	Johnston	RI .	02919	
9. NAMES AND ADDREST Director Name	SSES OF THE DIR	ECTORS (*X* BOX FOR AT	TACHMENT) FILL IN SPAC Director Name	ES BEFORE USING ATTA	CHMENTS	
Dianna Aguiar Street Address			Donna Rescio			
105 Charlotte	Drive		6 Heath Street			
City	State	Zip	City	State	Zip	
Warwick	RI	02886	Johnston	RI	02919	
Director Name			Director Name	•	-,	
Barbara A. D'A	llesandro		Street Address			
90 Peeptoad Ro	ad					
Chy	State	Zip	City	State	Zip	
N. Scituate	RI	02857				
10. SHARES AUTHORIZE AUTHORIZED SHARES	ED (*x* box for att	TACHMENT)	11. SHARES ISSUED ( ISSUED SHARES	"X" BOX FOR ATTACHMENT)		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 COMM NO P	AR VALUE		500	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

Barbara A. D'Allesandro

Print or Type Name of Officer

President Title of Officer

Form 630 12/00

#### 2001 Annual Corporate Report

SCITUATE FUEL ISLAND, INC. ID No: 105261

#### 8. (Continued)

Assistant Treasurer: Dianna Aguiar 105 Charlotte Drive Warwick, Rhode Island 02886

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. Name of Corporation

SCITUATE FUEL ISLAND INC.

3. Street Address Principal Business Office

North Scituate

City

State

90 Peeptoad Road 4. Business Phone No.

5. State of Incorporation

RI

RHODE ISLAND

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

sell at wholesale or retail fue oil or in any manner deal in petroleum products.
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name

President Name

Barbara A. D'Allesandro

Street Address

90 Peeptoad Road

N. Scituate

Secretary Name

State

RI

Zip

02857

Johnston

Walter Karspeck

Street Address

Treasurer Name

Donna Rescio

2208 Plainfield Pike

2208 Plainfield Pike

RI

02919

Zip

Zip

Zio

Zip

Barbara A. D'Allesandro

Street Address

90 Peeptoad Road

City

Zip

02886

26 Greenhill Road

Donna Rescio

Johnston Director Name

02919

N. Scituate 02857 Johnston R 7 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Dianna Aguair

Street Address

105 Charlotte Drive

Warwick

Director Name

Street Address

City

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT) AUTHORIZED SHARES

Number of Shares

State

Class/Series

State

RI

Par Value

City

City

State

RI

02919

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Street Address

Number of Shares

Class/Series

Par Value

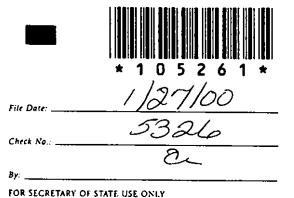
1,000 COMM NO PAR VALUE

500

Common

No Par Valu

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 e	xamined
this report, including any accompanying schedules and sta	tements, and
that all statements contained herein are true and correct.	
Daylors Q+ allerande - 1	/21/00
Memature of Officer Date	
Barbaira A. D'Allesandiro	
Print or Type Name of Officer	
_President	
Title of Officer	