



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual 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.

FILED

JUL 16 2020

BY

8194-8804 OS

1. Entity ID Number <u>96334</u>		2. Exact name of the Corporation <u>Northstar Bus Co. Inc.</u>									
3. Principal Office Address <u>1845 Smith St.</u>		City <u>Woburn</u>		State <u>RI</u>	Zip <u>02911</u>						
4. NAICS Code <u>426120</u>		6. Brief description of the character of business conducted in Rhode Island <u>School Busing</u>									
5. State of Incorporation <u>RI</u>											
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
President Name <u>Greg M. Maxwell</u>			Vice-President Name <u>Same</u>								
Street Address <u>1845 Smith St.</u>			Street Address <u>Same</u>								
City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>	City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>						
Secretary Name <u>SA</u>			Treasurer Name <u>SA</u>								
Street Address <u>SA</u>			Street Address <u>SA</u>								
City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>	City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>						
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
Director Name <u>SA</u>			Director Name <u>SA</u>								
Street Address <u>SA</u>			Street Address <u>SA</u>								
City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>	City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>						
Director Name <u>SA</u>			Director Name <u>SA</u>								
Street Address <u>SA</u>			Street Address <u>SA</u>								
City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>	City <u>Woburn</u>	State <u>RI</u>	Zip <u>02911</u>						
9. Shares Authorized This information is currently of record in the Department of State.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>								
Changes require an additional filing.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><u>100</u></td> <td><u>Woburn</u></td> <td><u>500</u></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<u>100</u>	<u>Woburn</u>	<u>500</u>
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<u>100</u>	<u>Woburn</u>	<u>500</u>									
8/17/20 Dept of State			3-23-20								
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.											
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.											
Name of Authorized Representative <u>Jeffrey Maxwell</u>					Date <u>3-30-2020</u>						
Signature of Authorized Representative <u>Jeffrey Maxwell</u>											