



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. 125585		2. Name of Corporation Waterson Stevedoring, Inc.			
3. Street Address Principal Business Office 16 HIGH POINT DRIVE			City NORTH SMITHFIELD	State RI	Zip 02896-
4. Business Phone No. 4013560800		5. State of Incorporation RHODE ISLAND			6. SIC Code 4491
7. Brief Description of the Character of Business Conducted in Rhode Island LOADING AND UNLOADING OF CARGO SHIPS					
8. NAMES AND ADDRESSES OF THE OFFICERS (X BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
President Name Bruce P. Waterson		Vice President Name Carol J. Waterson			
Street Address 16 High Point Drive		Street Address 16 High Point Drive			
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
Secretary Name Carol J. Waterson		Treasurer Name Bruce P. Waterson			
Street Address 16 High Point Drive		Street Address 16 High Point Drive			
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
9. NAMES AND ADDRESSES OF THE DIRECTORS (X BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
Director Name Bruce P. Waterson		Director Name Carol J. Waterson			
Street Address 16 High Point Drive		Street Address 16 High Point Drive			
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
Director Name None		Director Name None			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (X BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> 11. SHARES ISSUED (X BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 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 2 5 5 8 5

125585 DBC 01/24/05 10:19:18 AM
File Date 1-26-05
Check No. 3792
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.

Carol J. Waterson 1/24/2005
Signature of Officer Date
Carol J. Waterson
Print or Type Name of Officer
Vice 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)

1. Corporate ID No. 125585		2. Name of Corporation Waterson Stevedoring, Inc.			
3. Street Address Principal Business Office 16 HIGH POINT DRIVE			City NORTH SMITHFIELD	State RI	Zip 02896-
4. Business Phone No. 4013560800		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island LOADING AND UNLOADING OF CARGO SHIPS					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Bruce p. Waterson			Vice President Name Carol J. Waterson		
Street Address 16 HIGH POINT DRIVE			Street Address 16 HIGH POINT DRIVE		
City NORTH SMITHFIELD	State RI	Zip 02896	City NORTH SMITHFIELD	State RI	Zip 02896
Secretary Name			Treasurer Name		
Street Address 16 HIGH POINT DRIVE			Street Address 16 HIGH POINT DRIVE		
City NORTH SMITHFIELD	State RI	Zip 02896	City NORTH SMITHFIELD	State RI	Zip 02896
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address 16 HIGH POINT DRIVE			Street Address 16 HIGH POINT DRIVE		
City NORTH SMITHFIELD	State RI	Zip 02896	City NORTH SMITHFIELD	State RI	Zip 02896
Director Name			Director Name		
Street Address 16 HIGH POINT DRIVE			Street Address 16 HIGH POINT DRIVE		
City NORTH SMITHFIELD	State RI	Zip 02896	City NORTH SMITHFIELD	State RI	Zip 02896
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AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 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 2 5 5 8 5

125585 DBC 12/31/03 02:04:09 PM

File Date 1-8-04

Check No. 2910

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.

[Signature] 1/2/04
Signature of Officer Date

BRUCE P. WATERSON
Print or Type Name of Officer

PRESIDENT
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

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 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *125585*
2. Name of Corporation Waterson Stevedoring, Inc.
3. Street Address Principal Business Office
16 High Point Drive
4. Business Phone No. 401-356-0800
5. State of Incorporation RHODE ISLAND

City State Zip
North Smithfield Rhode Island 02896
6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island
LOADING AND UNLOADING OF CARGO SHIPS

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

President Name
Bruce P. Waterson
Street Address
16 High Point Drive
City State Zip
North Smithfield RI 02896

Vice President Name
Carol J. Waterson
Street Address
16 High Point Drive
City State Zip
North Smithfield RI 02896

Secretary Name
Carol J. Waterson
Street Address
16 High Point Drive
City State Zip
North Smithfield RI 02896

Treasurer Name
Bruce P. Waterson
Street Address
16 High Point Drive
City State Zip
North Smithfield RI 02896

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Director Name
Bruce P. Waterson
Street Address
16 High Point Drive
City State Zip
North Smithfield RI 02896

Director Name
Carol J. Waterson
Street Address
16 High Point Drive
City State Zip
North Smithfield RI 02896

Director Name
None
Street Address
City State Zip

Director Name
None
Street Address
City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series 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



**125585* 1/16/03 FILED
File Date JAN 22 2003
Check No.
By: CAM 310393
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.

Signature of Officer Bruce P. Waterson Date 1/16/03
Print or Type Name of Officer
President
Title of Officer