



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. 84893		2. Name of Corporation INLAND FUEL TERMINALS, INC.			
3. Street Address Principal Business Office 154 ADMIRAL STREET		City BRIDGEPORT		State CT	Zip 06605
4. Business Phone No. 203-362-3332 ext. 1379		5. State of Incorporation CONNECTICUT			6. SIC Code 2659
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE WHOLESALE AND RETAIL DISTRIBUTION OF FUEL OILS.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas S. Santa		Vice President Name Kevin R. Lloyd			
Street Address 154 Admiral Street		Street Address 154 Admiral Street			
City Bridgeport	State CT	Zip 06605	City Bridgeport	State CT	Zip 06605
Secretary Name Kevin R. Lloyd		Treasurer Name Kevin R. Lloyd			
Street Address 154 Admiral Street		Street Address 154 Admiral Street			
City Bridgeport	State CT	Zip 06605	City Bridgeport	State CT	Zip 06605
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Thomas S. Santa		Director Name Kevin R. Lloyd			
Street Address 154 Admiral Street		Street Address 154 Admiral Street			
City Bridgeport	State CT	Zip 06605	City Bridgeport	State CT	Zip 06605
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
500 COMM \$100.00 PAR VALUE			80	Common	100.00

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



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\*84893 FBC 01/05/05 10:57:05 AM\*

File Date 1/10/05

Check No. 300069

By: VS.

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.

Kevin R. Lloyd

Signature of Officer

Date

Kevin R. Lloyd

Print or Type Name of Officer

Secretary

Title of Officer

Form 630 12/01



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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 84893		2. Name of Corporation INLAND FUEL TERMINALS, INC.			
3. Street Address Principal Business Office 154 ADMIRAL STREET		City BRIDGEPORT		State CT	Zip 06605
4. Business Phone No. 2033623332		5. State of Incorporation CONNECTICUT			6. SIC Code 2659
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE WHOLESALE AND RETAIL DISTRIBUTION OF FUELOILS.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas S. Santa		Vice President Name Kevin R. Lloyd			
Street Address 154 Admiral Street		Street Address 154 Admiral Street			
City Bridgeport	State CT	Zip 06605	City Bridgeport	State CT	Zip 06605
Secretary Name Kevin R. Lloyd		Treasurer Name Kevin R. Lloyd			
Street Address 154 Admiral Street		Street Address 154 Admiral Street			
City Bridgeport	State CT	Zip 06605	City Bridgeport	State CT	Zip 06605
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name John S. Santa		Director Name Kevin R. Lloyd			
Street Address 154 Admiral Street		Street Address 154 Admiral Street			
City Bridgeport	State CT	Zip 06605	City Bridgeport	State CT	Zip 06605
Director Name Thomas S. Santa		Director Name			
Street Address 154 Admiral Street		Street Address			
City Bridgeport	State CT	Zip 06605	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
500	Common	100.00	80	Common	100.00

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



8 4 8 9 3

\*84893 FBC 12/29/03 01:43:04 PM\*

File Date

1-2-04

Check No.

301132

By:

*Kevin R. Lloyd*

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.

*Kevin R. Lloyd*

Signature of Officer

Date

12/29/03

Kevin R. Lloyd

Print or Type Name of Officer

CFO & Treasurer

Title of Officer

Form 630 12/01



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 OR PRINTED IN BLACK)

1. Corporate ID No.

84893

2. Name of Corporation

INLAND FUEL TERMINALS, INC.

3. Street Address Principal Business Office

154 Admiral Street

City

Bridgeport

State

CT

Zip

06605

4. Business Phone No.

203-362-3332

5. State of Incorporation

CONNECTICUT

6. SIC Code

2659

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

Operation of fuel terminal

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Thomas S. Santa

Vice President Name

Kevin R. Lloyd

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

Bridgeport

State

CT

Zip

06605

City

Bridgeport

State

CT

Zip

06605

Secretary Name

Kevin R. Lloyd

Treasurer Name

Kevin R. Lloyd

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

Bridgeport

State

CT

Zip

06605

City

Bridgeport

State

CT

Zip

06605

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

John S. Santa

Director Name

Kevin R. Lloyd

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

Bridgeport

State

CT

Zip

06605

City

Bridgeport

State

CT

Zip

06605

Director Name

Thomas S. Santa

Director Name

Kevin R. Lloyd

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

Bridgeport

State

CT

Zip

06605

City

Bridgeport

State

CT

Zip

06605

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

500 COMM \$100.00 PAR VALUE

Number of Shares

Class/Series

Par Value

80

Common

100.00

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



\* 8 4 8 9 3 \*

File Date:

3.20.03

Check No.:

300653

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.

*Kevin R. Lloyd*  
Signature of Officer

2/3/03  
Date

*Kevin R. Lloyd*  
Print or Type Name of Officer

Chief Financial Officer & Treasurer

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 2002**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **84893** 2. Name of Corporation **INLAND FUEL TERMINALS, INC.**

3. Street Address Principal Business Office **154 Admiral Street** City **Bridgeport** State **CT** Zip **06605**

4. Business Phone No. **203-362-3332** 5. State of Incorporation **CONNECTICUT** 6. SIC Code **2659**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Operation of fuel terminal**

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

President Name <b>Thomas S. Santa</b>	Vice President Name <b>Kevin R. Lloyd</b>
Street Address <b>154 Admiral Street</b>	Street Address <b>154 Admiral Street</b>
City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>	City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>
Secretary Name <b>Kevin R. Lloyd</b>	Treasurer Name <b>Kevin R. Lloyd</b>
Street Address <b>154 Admiral Street</b>	Street Address <b>154 Admiral Street</b>
City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>	City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>

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

Director Name <b>John S. Santa</b>	Director Name <b>Kevin R. Lloyd</b>
Street Address <b>154 Admiral Street</b>	Street Address <b>154 Admiral Street</b>
City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>	City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>
Director Name <b>Thomas S. Santa</b>	Director Name <b>Kevin R. Lloyd</b>
Street Address <b>154 Admiral Street</b>	Street Address <b>154 Admiral Street</b>
City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>	City <b>Bridgeport</b> State <b>CT</b> Zip <b>06605</b>

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**500 COMM \$100.00 PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**80 Common \$100.00**

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



\* 8 4 8 9 3 \*

File Date: 1/24/02

Check No: 30050

By: 91E

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 Kevin R. Lloyd Date 1/18/02

Print or Type Name of Officer Kevin R. Lloyd

Title of Officer Chief Financial Officer & Treasurer



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

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



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. 84893 2. Name of Corporation INLAND FUEL TERMINALS, INC.

3. Street Address Principal Business Office  
154 Admiral Street City Bridgeport State CT Zip 06605  
4. Business Phone No. 203-362-3332 5. State of Incorporation CONNECTICUT 6. SIC Code 2659

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

Operation of Fuel Terminal

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

President Name <u>Thomas S. Santa</u> Street Address <u>154 Admiral Street</u> City <u>Bridgeport</u> State <u>CT</u> Zip <u>06605</u>	Vice President Name <u>Kevin R. Lloyd</u> Street Address <u>154 Admiral Street</u> City <u>Bridgeport</u> State <u>CT</u> Zip <u>06605</u>
Secretary Name <u>Kevin R. Lloyd</u> Street Address <u>154 Admiral Street</u> City <u>Bridgeport</u> State <u>CT</u> Zip <u>06605</u>	Treasurer Name <u>Kevin R. Lloyd</u> Street Address <u>154 Admiral Street</u> City <u>Bridgeport</u> State <u>CT</u> Zip <u>06605</u>

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

Director Name <u>John S. Santa</u> Street Address <u>154 Admiral Street</u> City <u>Bridgeport</u> State <u>CT</u> Zip <u>06605</u>	Director Name <u>Kevin R. Lloyd</u> Street Address <u>154 Admiral Street</u> City <u>Bridgeport</u> State <u>CT</u> Zip <u>06605</u>
Director Name <u>Thomas S. Santa</u> Street Address <u>154 Admiral Street</u> City <u>Bridgeport</u> State <u>CT</u> Zip <u>06605</u>	Director Name  Street Address  City State Zip 

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>500</u>	<u>Common</u>	<u>\$100.00</u>

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>80</u>	<u>Common</u>	<u>\$100.00</u>

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



\* 8 4 8 9 3 \*

File Date: 2/20  
90959

Check No.: 2

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.

Kevin R. Lloyd 2/13/01  
Signature of Officer Date

Kevin R. Lloyd  
Print or Type Name of Officer

CFO & Treasurer  
Title of Officer



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

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. <b>84893</b>		2. Name of Corporation <b>INLAND FUEL TERMINALS, INC.</b>	
3. Street Address Principal Business Office <b>154 Admiral Street</b>		City <b>Bridgeport</b>	State <b>CT</b>
4. Business Phone No. <b>203-362-3332</b>		5. State of Incorporation <b>CONNECTICUT</b>	
6. SIC Code <b>2659</b>			
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Operation of Fuel Terminal</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>John S. Santa</b>		Vice President Name <b>Norman Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
Secretary Name <b>Donald Santa</b>		Treasurer Name <b>Thomas S. Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>S. George Santa</b>		Director Name <b>Donald Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
Director Name <b>Norman Santa</b>		Director Name <b>John S. Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
<b>500</b>	<b>Common</b>	<b>\$100.00</b>	
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<b>80</b>	<b>Common</b>	<b>\$100.00</b>	

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



\* 8 4 8 9 3 \*

File Date: 1/5/00  
Check No.: 107124  
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.

Thomas S. Santa 1/3/00  
Signature of Officer Date  
Thomas S. Santa  
Print or Type Name of Officer  
Treasurer  
Title of Officer

ATTACHMENT

Corporate ID No.: 84893

Name of Corporation: Inland Fuel Terminals, Inc.

8. Names and Addresses of Officers Con't.

Chief Financial Officer Name: Kevin R. Lloyd

Street Address: 154 Admiral Street

City: Bridgeport State: CT Zip: 06605



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

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 1999**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>84893</b>		2. Name of Corporation <b>INLAND FUEL TERMINALS, INC.</b>	
3. Street Address Principal Business Office <b>154 Admiral Street</b>		City <b>Bridgeport</b>	State <b>CT</b>
4. Business Phone No. <b>203-362-3332</b>		6. SIC Code <b>2659</b>	
5. State of Incorporation <b>CONNECTICUT</b>			
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Operation of Fuel Terminal</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> <b>FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
President Name <b>John S. Santa</b>		Vice President Name <b>Norman Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
Secretary Name <b>Donald Santa</b>		Treasurer Name <b>Thomas S. Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> <b>FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
Director Name <b>S. George Santa</b>		Director Name <b>Donald Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
Director Name <b>Norman Santa</b>		Director Name <b>John S. Santa</b>	
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>	
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>
Zip <b>06605</b>		Zip <b>06605</b>	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<b>500</b>	<b>Common</b>	<b>\$100.00</b>	
Number of Shares	Class/Series	Par Value	
<b>80</b>	<b>Common</b>	<b>\$100.00</b>	

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



\* 8 4 8 9 3 \*

File Date: 1-15-99  
Check No.: 75229  
By: AMF

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.

Thomas S. Santa 1/12/99  
Signature of Officer Date  
Thomas S. Santa  
Print or Type Name of Officer  
Treasurer  
Title of Officer

ATTACHMENT

Corporate ID No.: 84893

Name of Corporation: Inland Fuel Terminals, Inc.

8. Names and Addresses of Officers Con't.

Chief Financial Officer Name: Kevin R. Lloyd

Street Address: 154 Admiral Street

City: Bridgeport State: CT Zip: 06605

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

84893 Inland Fuel Terminals, Inc.

3. Street Address Principal Business Office

154 Admiral Street

City

Bridgeport

State

CT

Zip

06605

4. Business Phone No.

203-362-3332

5. State of Incorporation

Connecticut

6. SIC Code

2659

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

Operation of Fuel Terminal

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) ☒

President Name

John S. Santa

Vice President Name

Norman Santa

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

State

Zip

Bridgeport

CT

06605

City

State

Zip

Bridgeport

CT

06605

Secretary Name

Donald Santa

Treasurer Name

Thomas S. Santa

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

State

Zip

Bridgeport

CT

06605

City

State

Zip

Bridgeport

CT

06605

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name

S. George Santa

Director Name

Donald Santa

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

State

Zip

Bridgeport

CT

06605

City

State

Zip

Bridgeport

CT

06605

Director Name

Norman Santa

Director Name

John S. Santa

Street Address

154 Admiral Street

Street Address

154 Admiral Street

City

State

Zip

Bridgeport

CT

06605

City

State

Zip

Bridgeport

CT

06605

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

500

Common

\$100.00

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

80

Common

\$100.00

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

File Date: 7/1/98

Check No.: 671165

By: KHP

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: Thomas S. Santa Date: 6/26/98

Print or Type Name of Officer: Thomas S. Santa

Title of Officer: Treasurer

ATTACHMENT

Corporate ID No.: 84893

Name of Corporation: Inland Fuel Terminals, Inc.

8. Names and Addresses of Officers Con't.

Chief Financial Officer Name: Kevin R. Lloyd

Street Address: 154 Admiral Street

City: Bridgeport State: CT Zip: 06605



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

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040



**PROFIT CORPORATION ANNUAL REPORT 1997**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>84893</b>		2. Name of Corporation <b>INLAND FUEL TERMINALS, INC.</b>			
3. Street Address Principal Business Office <b>154 Admiral Street</b>		City <b>Bridgeport</b>	State <b>CT</b>		
4. Business Phone No. <b>203-362-3332</b>		5. State of Incorporation <b>CONNECTICUT</b>			
6. SIC Code <b>2659</b>					
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Operation of Fuel Terminal</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)					
President Name <b>John S. Santa</b>		Vice President Name <b>Norman Santa</b>			
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>			
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>		
Zip <b>06601</b>		Zip <b>06601</b>			
Secretary Name <b>Donald Santa</b>		Treasurer Name <b>Thomas S. Santa</b>			
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>			
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>		
Zip <b>06601</b>		Zip <b>06601</b>			
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)					
Director Name <b>S. George Santa</b>		Director Name <b>Donald Santa</b>			
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>			
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>		
Zip <b>06601</b>		Zip <b>06601</b>			
Director Name <b>Norman Santa</b>		Director Name <b>John S. Santa</b>			
Street Address <b>154 Admiral Street</b>		Street Address <b>154 Admiral Street</b>			
City <b>Bridgeport</b>	State <b>CT</b>	City <b>Bridgeport</b>	State <b>CT</b>		
Zip <b>06601</b>		Zip <b>06601</b>			
10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>500</b>	<b>Common</b>	<b>\$100.00</b>	<b>80</b>	<b>Common</b>	<b>\$100.00</b>

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



File Date: **1/13/97**  
Check No.: **55354**  
By: **CC** **WLC**  
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.

**Thomas S. Santa** **1/6/97**  
Signature of Officer Date  
**THOMAS S. Santa**  
Print or Type Name of Officer  
**TREAS**  
Title of Officer

# PROFIT CORPORATION ANNUAL REPORT

## 1996



State of Rhode Island and Providence Plantations  
James R. Langevin, *Secretary of State*  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903-1335 • (401) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 84893		2. NAME OF CORPORATION INLAND FUEL TERMINALS, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 154 Admiral Street		CITY Bridgeport	STATE CT
4. BUSINESS PHONE NO. 203-362-3332		5. STATE OF INCORPORATION CONNECTICUT	6. SEC CODE 2659
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Operation of fuel terminal			

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME John S. Santa		VICE PRESIDENT NAME Norman Santa	
STREET ADDRESS 154 Admiral Street		STREET ADDRESS 154 Admiral Street	
CITY Bridgeport	STATE CT	CITY Bridgeport	STATE CT
SECRETARY NAME Donald Santa		TREASURER NAME Thomas S. Santa	
STREET ADDRESS 154 Admiral Street		STREET ADDRESS 154 Admiral Street	
CITY Bridgeport	STATE CT	CITY Bridgeport	STATE CT

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME S. George Santa		DIRECTOR NAME Donald Santa	
STREET ADDRESS 154 Admiral Street		STREET ADDRESS 154 Admiral Street	
CITY Bridgeport	STATE CT	CITY Bridgeport	STATE CT
DIRECTOR NAME Norman Santa		DIRECTOR NAME John S. Santa	
STREET ADDRESS 154 Admiral Street		STREET ADDRESS 154 Admiral Street	
CITY Bridgeport	STATE CT	CITY Bridgeport	STATE CT

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE PER SHARE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE PER SHARE
500	Common	\$100.00	80	Common	\$100.00

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.

*Thomas S. Santa*  
Signature of Officer

THOMAS S. SANTA  
Print or Type Name of Officer

TREASURER 1/11/96 (21)  
Title of Officer Date

File Date: 1-11-96

Check No: 102347

By: (Signature)

For Secretary of State Use Only