



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**

**Annual Report for the year:** 2021  
**Corporation**

JAN 07 2021  
 BY [Signature]

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 76101		2. Exact name of the Corporation Save-On Oil Company, Inc.			
3. Principal Office Address 15 Talbot Street		City North Providence		State RI	Zip 02904
4. NAICS Code 454310		6. Brief description of the character of business conducted in Rhode Island To carry on the sales and delivery of oil.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Paul H. Sayles			Vice-President Name Jean F. Sayles		
Street Address 15 Talbot Street			Street Address 15 Talbot Street		
City No. Providence		State RI	Zip 02904	City No. Providence	
State RI		Zip 02904	State RI		Zip 02904
Secretary Name Paul H. Sayles			Treasurer Name Jean F. Sayles		
Street Address 15 Talbot Street			Street Address 15 Talbot Street		
City No. Providence		State RI	Zip 02904	City No. Providence	
State RI		Zip 02904	State RI		Zip 02904
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Paul H. Sayles			Director Name Jean F. Sayles		
Street Address 15 Talbot Street			Street Address 15 Talbot Street		
City No. Providence		State RI	Zip 02904	City No. Providence	
State RI		Zip 02904	State RI		Zip 02904
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
State		Zip	State		Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			500	Common	No Par Value
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. <b>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.</b>					
Name of Authorized Representative Paul H. Sayles, President				Date 1-2-21	
Signature of Authorized Representative <u>[Signature]</u>					