



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

**Annual Report for the year: 2023**  
**Corporation**

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- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

|   |                    |   |  |                           |                     |
|---|--------------------|---|--|---------------------------|---------------------|
| 1. Entity ID Number<br><b>001695705</b>   |                    | 2. Exact name of the Corporation<br><b>Diamond Water Systems, Inc.</b>  |  |                           |                     |
| 3. Principal Office Address<br><b>863 Montgomery Street</b>   |                    |   | City<br><b>Chicopee</b>                        | State<br><b>MA</b>        | Zip<br><b>01013</b> |
| 4. NAICS Code<br><b>811310</b>  |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>We assemble, service and repair water filtration systems for the industrial, municipal and commercial applications, as well as supply parts for them.</b> |  |                           |                     |
| 5. State of Incorporation<br><b>Massachusetts</b>   |                    |   |  |                           |                     |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                    |   |  |                           |                     |
| President Name<br><b>William E. Dalton III</b>  |                    |   | Vice-President Name<br><b>Dennis Rousseau</b>  |                           |                     |
| Street Address<br><b>65 High Street</b>   |                    |   | Street Address<br><b>10 Homeward Lane</b>      |                           |                     |
| City<br><b>S. Hadley</b>  | State<br><b>MA</b> | Zip<br><b>01075</b>   | City<br><b>Walpole</b>                         | State<br><b>MA</b>        | Zip<br><b>02081</b> |
| Secretary Name<br><b>Dennis Rousseau</b>  |                    |   | Treasurer Name<br><b>William E. Dalton III</b> |                           |                     |
| Street Address<br><b>10 Homeward Lane</b>   |                    |   | Street Address<br><b>65 High Street</b>        |                           |                     |
| City<br><b>Walpole</b>  | State<br><b>MA</b> | Zip<br><b>02081</b>   | City<br><b>S. Hadley</b>                       | State<br><b>MA</b>        | Zip<br><b>01075</b> |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |   |  |                           |                     |
| Director Name<br><b>N/A</b>   |                    |   | Director Name                                  |                           |                     |
| Street Address  |                    |   | Street Address                                 |                           |                     |
| City  | State              | Zip   | City   | State                     | Zip                 |
| Director Name   |                    |   | Director Name                                  |                           |                     |
| Street Address  |                    |   | Street Address                                 |                           |                     |
| City  | State              | Zip   | City   | State                     | Zip                 |
| 9. Shares Authorized  |                    | 10. Shares Issued <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.<br><br>Changes require an additional filing.  |                    | NUMBER OF SHARES  |  | CLASS/SERIES              |                     |
|   |                    | <b>0</b>  |  | <b>CNP</b>                |                     |
|   |                    |   |  | <b>0.0000</b>             |                     |
|   |                    |   |  |                           |                     |
| 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<br><b>Donna Dunlap</b>  |                    |   |  | Date<br><b>12/06/2022</b> |                     |
| Signature of Authorized Representative<br><i>Donna Dunlap</i>   |                    |   |  | <b>FILED</b>              |                     |

MAIL TO:  
 Division of Business Services  
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 Website: www.sos.ri.gov

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