



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 000011010		2. Exact name of the Corporation East Greenwich Oil Co. Inc.			
3. Principal Office Address 390 Main St.			City East Greenwich	State RI	Zip 02818
4. NAICS Code 454310		6. Brief description of the character of business conducted in Rhode Island Heating oil delivery. Heating system maintenance, repair, and installation.			
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 Stephen A. deLisle			Vice-President Name		
Street Address 58 Wanton Shippee Rd.			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
Secretary Name Joyce L. deLisle			Treasurer Name		
Street Address 398 Main St.			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Frederick J Tarbox Sr			Director Name		
Street Address 390 Main St.			Street Address		
City East Greenwich	State RI	Zip 02818	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.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			100	NO PAR	\$0
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 Stephen A. deLisle				Date 1/19/2023	
Signature of Authorized Representative 					