



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

(NO ACTIVITY)

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00 • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 4107		2. Name of Corporation CHEVALIER'S TOWING SERVICE INC		
3. Street Address Principal Business Office 2305 NEW LONDON Tpk,		City COVENTRY	State R.I.	Zip 02816
4. Business Phone No. 822-3500 / 822-6412		5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island TOWING & AUTO REPAIRS				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name JAMES G CHEVALIER		Vice President Name JEFFREY J CHEVALIER		
Street Address 26 HOLMES RD		Street Address 26 HOLMES RD.		
City COVENTRY	State R.I.	Zip 02816	City COVENTRY	State R.I.
Secretary Name LILLIAN E CHEVALIER		Treasurer Name JAMES G CHEVALIER		
Street Address 26 HOLMES RD		Street Address 26 HOLMES RD		
City COVENTRY	State R.I.	Zip 02816	City COVENTRY	State R.I.
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name JAMES G CHEVALIER		Director Name LILLIAN E CHEVALIER		
Street Address 26 HOLMES RD		Street Address 26 HOLMES RD.		
City COVENTRY	State R.I.	Zip 02816	City COVENTRY	State R.I.
Director Name NONE		Director Name NONE		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED 500 COMMON NO PAR VALUE				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES -- THIS SECTION MUST BE COMPLETED				
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.				
Number of Shares 100		Class/Series COMMON		Par Value NO PAR

RECEIVED
SECRETARY OF STATE
AUG 28 11:43 AM '09

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.

11:43

File Date **FILED**

Check No. **AUG 28 2009**

By: **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: **James G Chevalier** Date: **8/20/09**

Print or Type Name: **JAMES G CHEVALIER**

Title: **PRESIDENT**