



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. 6176 | | 2. Name of Corporation Mac & Bob, Inc. | |
| 3. Street Address Principal Business Office 54 ELLERY ROAD | | City NEWPORT | State RI |
| 4. Business Phone No. 4018464914 | | 5. State of Incorporation RHODE ISLAND | 6. SIC Code 34 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island ENGAGE IN GENERAL CONSTRUCTION WORK | | | |

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

| | | | | | |
|--------------------------------------|-------------|--------------|--------------------------------------|-------------|--------------|
| President Name Ronald MacDonald | | | Vice President Name | | |
| Street Address 21 Harrison Avenue | | | Street Address | | |
| City Newport | State RI | Zip 02840 | City | State | Zip |
| Secretary Name Carol MacDonald | | | Treasurer Name Ronald MacDonald | | |
| Street Address 21 Harrison Avenue | | | Street Address 21 Harrison Avenue | | |
| City Newport | State RI | Zip 02840 | City Newport | State RI | Zip 02840 |

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

| | | | | | |
|--------------------------------------|-------------|--------------|----------------------------------|-------------|--------------|
| Director Name Ronald MacDonald | | | Director Name Kevin MacDonald | | |
| Street Address 21 Harrison Avenue | | | Street Address 54 Ellery Road | | |
| City Newport | State RI | Zip 02840 | City Newport | State RI | Zip 02840 |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |

10. SHARES AUTHORIZED (X) BOX FOR ATTACHMENT () SHARES ISSUED (X) BOX FOR ATTACHMENT ()

| AUTHORIZED SHARES | | | ISSUED SHARES | | |
|-------------------|--------------|-----------|------------------|--------------|--------------|
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 4,000 | NO PAR VALUE | | 200 | common | no par value |

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



6 1 7 6

6176 DBC 01/18/05 02:47:37 PM

File Date 6-7-08

Check No. 37599

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] 6/1/05
Signature of Officer Date
Ronald MacDonald
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

| | | | | | |
|--|--------------|---|---|-------------------|--------------|
| 1. Corporate ID No 6176 | | 2. Name of Corporation Mac & Bob, Inc. | | | |
| 3. Street Address Principal Business Office 54 Ellery Road | | | City Newport | State RI | Zip 02840 |
| 4. Business Phone No. 846-4914 | | 5. State of Incorporation RHODE ISLAND | | 6. SIC Code 34 | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island ENGAGE IN GENERAL CONSTRUCTION WORK | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Ronald MacDonald | | | Vice President Name | | |
| Street Address 21 Harrison Avenue | | | Street Address | | |
| City Newport | State RI | Zip 02840 | City | State | Zip |
| Secretary Name Carol MacDonald | | | Treasurer Name Ronald MacDonald | | |
| Street Address 21 Harrison Avenue | | | Street Address 21 Harrison Avenue | | |
| City Newport | State RI | Zip 02840 | City Newport | State RI | Zip 02840 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name Ronald MacDonald | | | Director Name Kevin MacDonald | | |
| Street Address 21 Harrison Avenue | | | Street Address 54 Ellery Road | | |
| City Newport | State RI | Zip 02840 | City Newport | State RI | Zip 02840 |
| 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 |
| 4,000 NO PAR VALUE | | | 200 | common | no par value |

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



* 6 1 7 6 *

FILED

File Date

JAN 12 2004

Check No.

30 M16679 @MB

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.

Ronald MacDonald
Signature of Officer

01/28/04
Date

RONALD MACDONALD
Print or Type Name of Officer

Pres.
Title of Officer

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. **6176** 2. Name of Corporation **Mac & Bob, Inc.**
3. Street Address Principal Business Office **54 Ellery Road** City **Newport** State **RI** Zip **02840**
4. Business Phone No. **846-4914** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**

7. Brief Description of the Character of Business Conducted in Rhode Island
engage in general construction and construction work

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

| | |
|--|--|
| President Name Ronald MacDonald Street Address 21 Harrison Avenue City Newport State RI Zip 02840 | Vice President Name Street Address City _____ State _____ Zip _____ |
| Secretary Name Carol MacDonald Street Address 21 Harrison Avenue City Newport State RI Zip 02840 | Treasurer Name Ronald MacDonald Street Address 21 Harrison Avenue City Newport State RI Zip 02840 |

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

| | |
|---|--|
| Director Name Ronald MacDonald Street Address 21 Harrison Avenue City Newport State RI Zip 02840 | Director Name Kevin MacDonald Street Address 54 Ellery Road City Newport State RI Zip 02840 |
| Director Name Street Address City _____ State _____ Zip _____ | Director Name Street Address City _____ State _____ Zip _____ |

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

| AUTHORIZED SHARES | Class/Series | Par Value |
|---------------------------|--------------|-----------|
| 4,000 NO PAR VALUE | | |

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

| ISSUED SHARES | Class/Series | Par Value |
|---------------|---------------|---------------------|
| 200 | common | no par value |

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



* 6 1 7 6 *

File Date: **1-30-03**
Check No.: **33743**
By: **UP**

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: **Ronald MacDonald** Date: **1/24/03**
Print or Type Name of Officer: **RONALD MAC DONALD**

Title of Officer: **Pres.**



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. **6176**
2. Name of Corporation **Mac & Bob, Inc.**
3. Street Address Principal Business Office
54 Ellery Road
4. Business Phone No. **846-4914**
5. State of Incorporation **RHODE ISLAND**

City **Newport** State **RI** Zip **02840**
6. SIC Code **34**

7. Brief Description of the Character of Business Conducted in Rhode Island
engage in general constructing and construction work

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

President Name
Ronald MacDonald
Street Address
21 Harrison Avenue
City **Newport** State **RI** Zip **02840**

Vice President Name
Street Address
City State Zip

Secretary Name
Carol MacDonald
Street Address
21 Harrison Avenue
City **Newport** State **RI** Zip **02840**

Treasurer Name
Ronald MacDonald
Street Address
21 Harrison Avenue
City **Newport** State **RI** Zip **02840**

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

Director Name
Ronald MacDonald
Street Address
21 Harrison Avenue
City **Newport** State **RI** Zip **02840**

Director Name
Kevin MacDonald
Street Address
54 Ellery Road
City **Newport** State **RI** Zip **02840**

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
4,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
200 common no par value

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



* 6 1 7 6 *

File Date: 1-17-02

Check No: 31712

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 of Officer [Signature] Date 12/29/01

Print or Type Name of Officer RONALD MACDONALD

Title of Officer PPS



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. **6176** 2. Name of Corporation **Mac & Bob, Inc.**
3. Street Address Principal Business Office **54 Ellery Road** City **Newport** State **RI** Zip **02840**
4. Business Phone No. **846-4914** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**
7. Brief Description of the Character of Business Conducted in Rhode Island
engage in general constructing and construction work

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

| | |
|--|---------------------|
| President Name Ronald MacDonald | Vice President Name |
| Street Address 21 Harrison Avenue | Street Address |
| City Newport State RI Zip 02840 | City State Zip |

| | |
|--|--|
| Secretary Name Carol MacDonald | Treasurer Name Ronald MacDonald |
| Street Address 21 Harrison Avenue | Street Address 21 Harrison Avenue |
| City Newport State RI Zip 02840 | City Newport State RI Zip 02840 |

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

| | |
|--|--|
| Director Name Ronald MacDonald | Director Name Kevin MacDonald |
| Street Address 21 Harrison Avenue | Street Address 54 Ellery Road |
| City Newport State RI Zip 02840 | City Newport State RI Zip 02840 |

| | |
|----------------|----------------|
| Director Name | Director Name |
| Street Address | Street Address |
| City State Zip | City State Zip |

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

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|---------------------|-----------|
| 4,000 | NO PAR VALUE | |

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

ISSUED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|---------------|---------------------|
| 200 | common | no par value |

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



* 6 1 7 6 *

2/18

File Date: _____

Check No.: 30159

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] 1/16/01
Signature of Officer Date

Kevin MacDonald
Print or Type Name of Officer

Vice President
Title of Officer

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. 6176 2. Name of Corporation Mac & Bob, Inc.
 3. Street Address Principal Business Office 54 Ellery Road City Newport State RI Zip 02840
 4. Business Phone No. 846-4914 5. State of Incorporation RHODE ISLAND 6. SIC Code 34
 7. Brief Description of the Character of Business Conducted in Rhode Island engage in general constructing and construction work

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

| | |
|--|--|
| President Name <u>Ronald MacDonald</u> Street Address <u>21 Harrison Avenue</u> City <u>Newport</u> State <u>RI</u> Zip <u>02840</u> | Vice President Name Street Address City _____ State _____ Zip _____ |
| Secretary Name <u>Carol MacDonald</u> Street Address <u>21 Harrison Avenue</u> City <u>Newport</u> State <u>RI</u> Zip <u>02840</u> | Treasurer Name <u>Ronald MacDonald</u> Street Address <u>21 Harrison Avenue</u> City <u>Newport</u> State <u>RI</u> Zip <u>02840</u> |

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

| | |
|---|--|
| Director Name <u>Ronald MacDonald</u> Street Address <u>21 Harrison Avenue</u> City <u>Newport</u> State <u>RI</u> Zip <u>02840</u> | Director Name <u>Kevin MacDonald</u> Street Address <u>54 Ellery Road</u> City <u>Newport</u> State <u>RI</u> Zip <u>02840</u> |
| Director Name Street Address City _____ State _____ Zip _____ | Director Name Street Address City _____ State _____ Zip _____ |

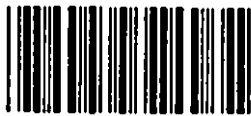
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | Number of Shares | Class/Series | Par Value |
|-------------------|------------------|--------------------|-----------|
| | <u>4000</u> | <u>NO PAR VAL.</u> | |

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

| ISSUED SHARES | Number of Shares | Class/Series | Par Value |
|---------------|------------------|---------------|---------------------|
| | <u>200</u> | <u>common</u> | <u>no par value</u> |

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



* 6 1 7 6 *

File Date: 1/18/00
 Check No.: 28300
 By: [Signature]

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] Date 1/14/00
 Signature of Officer Ronald MacDonald
 Print or Type Name of Officer President



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. 6176 | | 2. Name of Corporation Mac & Bob, Inc. | | | |
| 3. Street Address Principal Business Office 21 Harrison Avenue | | | City Newport | State RI | Zip 02840 |
| 4. Business Phone No. 846-4914 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 34 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island engage in general constrecting and construction work | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Ronald MacDonald | | | Vice President Name | | |
| Street Address 21 Harrison Avenue | | | Street Address | | |
| City Newport | State RI | Zip 02840 | City | State | Zip |
| Secretary Name Carol MacDonald | | | Treasurer Name Ronald MacDonald | | |
| Street Address 21 Harrison Avenue | | | Street Address 21 Harrison Avenue | | |
| City Newport | State RI | Zip 02840 | City Newport | State RI | Zip 02840 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name Ronald MacDonald | | | Director Name Kevin MacDonald | | |
| Street Address 21 Harrison Avenue | | | Street Address 54 Ellery Road | | |
| City Newport | State RI | Zip 02840 | City Newport | State RI | Zip 02840 |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) | | | | | |
| AUTHORIZED SHARES | | | ISSUED SHARES | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 4000 NO PAR VAL | | | 200 | common | no par val |
| 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) | | | | | |

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



* 6 1 7 6 *

File Date: Feb 2, 99

Check No.: 26645

By: JD / [Signature]

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]
Signature of Officer

Ronald MacDonald, President

Print or Type Name of Officer

Title of Officer

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. **6176** 2. Name of Corporation **Mac & Bob, Inc.**
3. Street Address Principal Business Office **21 Harrison Avenue** City **Newport** State **RI** Zip **02840**
4. Business Phone No. **846-4914** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0034**
7. Brief Description of the Character of Business Conducted in Rhode Island
engage in general contracting and construction work

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

| | |
|--|--|
| President Name Ronald MacDonald | Vice President Name |
| Street Address 21 Harrison Avenue | Street Address |
| City Newport State RI Zip 02840 | City State Zip |
| Secretary Name Carol MacDonald | Treasurer Name Ronald MacDonald |
| Street Address 21 Harrison Avenue | Street Address 21 Harrison Avenue |
| City Newport State RI Zip 02840 | City Newport State RI Zip 02840 |

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

| | |
|--|--|
| Director Name Ronald MacDonald | Director Name Kevin MacDonald |
| Street Address 21 Harrison Avenue | Street Address 54 Ellery Road |
| City Newport State RI Zip 02840 | City Newport State RI Zip 02840 |
| Director Name | Director Name |
| Street Address | Street Address |
| City State Zip | City State Zip |

| 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) | | | 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) | | |
|--|--------------|-----------|--|---------------|---------------------|
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 4000 NO PAR VAL. | | | 200 | common | no par value |

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



3.2.98
25384
IUP

File Date: _____
Check No.: _____
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.

Ronald MacDonald 1/21/98
Signature of Officer Date
RONALD MACDONALD
Print or Type Name of Officer
Pres.
Title of Officer

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. 6176 | | 2. Name of Corporation Mac & Bob, Inc. | |
| 3. Street Address Principal Business Office 21 Harrison Avenue | | City Newport | State RI |
| 4. Business Phone No. (401) 846-4914 | | 5. State of Incorporation RHODE ISLAND | 6. SIC Code 0034 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island engage in general constructing and construction work | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) | | | |
| President Name Ronald MacDonald | | Vice President Name | |
| Street Address 21 Harrison Avenue | | Street Address | |
| City Newport | State RI | City | State |
| Zip 02840 | | Zip | |
| Secretary Name Carol MacDonald | | Treasurer Name Ronald MacDonald | |
| Street Address 21 Harrison Avenue | | Street Address 21 Harrison Avenue | |
| City Newport | State RI | City Newport | State RI |
| Zip 02840 | | Zip 02840 | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) | | | |
| Director Name Ronald MacDonald | | Director Name Kevin MacDonald | |
| Street Address 21 Harrison Avenue | | Street Address 54 Ellery Road | |
| City Newport | State RI | City Newport | State RI |
| Zip 02840 | | Zip 02840 | |
| 10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT) | | | |
| AUTHORIZED SHARES | | | ISSUED SHARES |
| Number of Shares | Class/Series | Par Value | Number of Shares |
| 4000 NO PAR VAL. | | | 200 |
| | | | common |
| | | | none |

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



File Date: 2-26-97
Check No.: 00811
By: ICP / JCC

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: Ronald MacDonald Date: 1/10/97
Print or Type Name of Officer: RONALD MACDONALD President
Title of Officer: _____

**PROFIT CORPORATON
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 0006176
2 NAME OF CORPORATION Mac & Bob, Inc.
3 STREET ADDRESS PRINCIPAL BUSINESS OFFICE 54 Ellery Road
CITY Newport STATE RI ZIP CODE 02840
4 BUSINESS PHONE NO. (401) 846-4914
5 STATE OF INCORPORATION Rhode Island
6 SIC CODE
7 BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
General Construction

8. NAMES AND ADDRESSES OF THE OFFICERS

| | | | | | |
|------------------------------------|-------------|-------------------|--|-------------|-------------------|
| PRESIDENT NAME Ronald MacDonald | | | VICE PRESIDENT NAME Kevin MacDonald | | |
| STREET ADDRESS 54 Ellery Road | | | STREET ADDRESS 85 Blackpoint Lane | | |
| CITY Newport | STATE RI | ZIP CODE 02840 | CITY Portsmouth | STATE RI | ZIP CODE 02871 |
| SECRETARY NAME Carol MacDonald | | | TREASURER NAME Keith MacDonald | | |
| STREET ADDRESS 54 Ellery Road | | | STREET ADDRESS 54 Ellery Road | | |
| CITY Newport | STATE RI | ZIP CODE 02840 | CITY Newport | STATE RI | ZIP CODE 02840 |

9. NAMES AND ADDRESSES OF THE DIRECTORS

| | | | | | |
|-----------------------------------|-------------|-------------------|--------------------------------------|-------------|-------------------|
| DIRECTOR NAME Ronald MacDonald | | | DIRECTOR NAME Kevin MacDonald | | |
| STREET ADDRESS 54 Ellery Road | | | STREET ADDRESS 85 Blackpoint Lane | | |
| CITY Newport | STATE RI | ZIP CODE 02840 | CITY Portsmouth | STATE RI | ZIP CODE 02840 |
| DIRECTOR NAME Keith MacDonald | | | DIRECTOR NAME | | |
| STREET ADDRESS 54 Ellery Road | | | STREET ADDRESS | | |
| CITY Newport | STATE RI | ZIP CODE 02840 | CITY | STATE | ZIP CODE |

10. SHARES AUTHORIZED AND ISSUED

| NUMBER OF SHARES | AUTHORIZED SHARES CLASS / SERIES | PAR VALUE | NUMBER OF SHARES | ISSUED SHARES CLASS / SERIES | PAR VALUE |
|------------------|----------------------------------|-----------|------------------|------------------------------|-----------|
| 4,000 | Common | 0 | 200 | Common | 0 |

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.

Ronald M MacDonald
Signature of Officer
Ronald MacDonald
Print or Type Name of Officer
President
9/10/96
Date
Title of Officer

File Date: 9/20
Check No: 22273
By: UB
For Secretary of State Use Only



ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0006178 Annual Report for the year: 1995

Name of Corporation: MAC & BOB, INC.

Business entity organized under the laws of the State of: R.I.

Business Entity is (check one):
 Business Corporation (See RIGI, Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

For foreign entity, address and telephone number of principal office:

21 HARRISON AVE
Newport,
Rhode Island
 Phone: (401) 848-7797

Brief statement of the character of business conducted in Rhode Island:
GENERAL CONTRACTOR

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

Phone: (401) 848-7797

THE NAMES OF THE OFFICERS ARE:

| OFFICER | STREET ADDRESS | CITY/STATE | ZIP CODE |
|---|------------------------|----------------------|--------------|
| PRESIDENT <u>RONALD M. MACDONALD</u> | <u>21 HARRISON AVE</u> | <u>Newport, R.I.</u> | <u>02840</u> |
| VICE PRESIDENT <u>Keith M. MacDONALD</u> | <u>24 PALMER ST</u> | <u>Newport, R.I.</u> | <u>02840</u> |
| SECRETARY <u>Kevin J MacDONALD</u> | <u>21 HARRISON AVE</u> | <u>Newport, R.I.</u> | <u>02840</u> |
| TREASURER <u>RONALD M. MACDONALD</u> | <u>21 HARRISON AVE</u> | <u>Newport RI</u> | <u>02840</u> |

THE NAMES OF THE DIRECTORS ARE:

| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
|------|----------------|------------|----------|
| | | | |
| | | | |
| | | | |

| NUMBER OF SHARES AUTHORIZED (Rider may be attached) | | NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) | |
|---|----------------------------|---|----------------------------|
| Number of Shares | Class / Series | Number of Shares | Class / Series |
| <u>4000</u> | <u>Common no par value</u> | <u>200</u> | <u>COMMON NO PAR value</u> |

Date: 1/5, 19 95
 By: RONALD M. MACDONALD
PRINT OR TYPE NAME OF OFFICER SIGNING
TITLE OF OFFICER SIGNING Pres

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

RONALD M. MACDONALD
21 HARRISON AVE.
NEWPORT RI 02840

FILED
 MAR 24 1995
 BY: ASB
19190

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March

CH 18395

Corporate ID: 0006175 Annual Report for the year: 1994

Name of Business Entity: Mac & Bob, Inc.

Business entity organized under the laws of the State of: R.I.

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

21 Harrison Avenue
Newport, RI 02840

Phone: (401) 846-4914

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Ronald MacDonald

21 Harrison Avenue

Newport RI 02840

Brief statement of the character of business conducted in Rhode Island:

general contracting and construction

Date of Organization: July 13, 1979

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

| | | | |
|---|---------------------------|----------------|-----------------|
| <input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) | STREET ADDRESS | CITY/STATE | ZIP CODE |
| <u>Ronald MacDonald</u> | <u>21 Harrison Avenue</u> | <u>Newport</u> | <u>RI 02840</u> |

| | | | |
|--|----------------|------------|----------|
| <input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) | STREET ADDRESS | CITY/STATE | ZIP CODE |
| | | | |

| | | | |
|--|---------------------------|----------------|-----------------|
| <input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) | STREET ADDRESS | CITY/STATE | ZIP CODE |
| <u>Carol MacDonald</u> | <u>21 Harrison Avenue</u> | <u>Newport</u> | <u>RI 02840</u> |

| | | | |
|---|---------------------------|----------------|-----------------|
| <input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) | STREET ADDRESS | CITY/STATE | ZIP CODE |
| <u>Ronald MacDonald</u> | <u>21 Harrison Avenue</u> | <u>Newport</u> | <u>RI 02840</u> |

THE NAMES OF THE DIRECTORS ARE:

| | | | |
|-------------------------|---------------------------|----------------|-----------------|
| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
| <u>Ronald MacDonald</u> | <u>21 Harrison Avenue</u> | <u>Newport</u> | <u>RI 02840</u> |

| | | | |
|------------------------|---------------------------|----------------|-----------------|
| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
| <u>Kevin MacDonald</u> | <u>21 Harrison Avenue</u> | <u>Newport</u> | <u>RI 02840</u> |

| | | | |
|------|----------------|------------|----------|
| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
| | | | |

| | |
|---|---|
| NUMBER OF SHARES AUTHORIZED (If Applicable) | NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable) |
|---|---|

| | |
|--------------------|-------------------|
| NUMBER <u>4000</u> | NUMBER <u>200</u> |
|--------------------|-------------------|

| | |
|---------------------|---------------------|
| CLASS <u>common</u> | CLASS <u>common</u> |
|---------------------|---------------------|

| | |
|--------|--------|
| SERIES | SERIES |
|--------|--------|

| | |
|--|--|
| PAR VALUE OR WITHOUT PAR <u>no par value</u> | PAR VALUE OR WITHOUT PAR <u>no par value</u> |
|--|--|

Date March 1, 1994

By: [Signature]

FILED

Ronald MacDonald

OCT 12 1994

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

By: [Signature] CH 18395

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

RONALD M. MACDONALD
21 HARRISON AVE.
NEWPORT RI 02840

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

15758

Corporate ID 0005176 Annual Report for the year 1993

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Construction and Contracting

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 21 Harrison Avenue, Newport, RI

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|------------------|----------------|--|
| Ronald MacDonald | Director | 21 Harrison Avenue, Newport, RI |
| Kevin MacDonald | Director | 21 Harrison Avenue, Newport, RI |
| Keith MacDonald | Director | 21 Harrison Avenue, Newport, RI |
| Ronald MacDonald | President | 21 Harrison Avenue, Newport, RI |
| | Vice President | |
| Carol MacDonald | Secretary | 21 Harrison Avenue, Newport, RI |
| Ronald MacDonald | Treasurer | 21 Harrison Avenue, Newport, RI |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4000 | Common | | NO PAR VALUE |

PAID

FEB 05 1993

SECY OF STATE

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 2000 | Common | | NO PAR VALUE |

Dated February 4, 19 93

(Name of Corporation)

By [Signature]
Title [Signature]

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

VF 14399

Corporate ID 000E17E Annual Report for the year 1992

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of the state of Rhode Island

THIRD: Character of business, briefly stated, is General Construction & Contracting

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 21 Harrison Ave., Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|------------------|----------------|--|
| Ronald MacDonald | Director | 21 Harrison Ave., Newport, RI 02840 |
| Kevin MacDonald | Director | same |
| Keith MacDonald | Director | same |
| Ronald MacDonald | President | same |
| | Vice President | |
| Carol MacDonald | Secretary | same |
| Ronald MacDonald | Treasurer | same |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4,000 | common | | no par |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|-------|--------|--|
| 200 | | | |

Dated Feb 11 19 92

Mac & Bob, Inc.

(Name of Corporation)

By Ronald MacDonald

Title Pres.

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

55

Corporate ID 000E176 Annual Report for the year 1991

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of the state of Rhode Island

THIRD: Character of business, briefly stated, is General Construction & Contracting

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 21 Harrison Avenue, Newport, R.I. 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|------------------|----------------|--|
| Ronald MacDonald | Director | 21 Harrison Avenue, Newport, R.I. 02840 |
| Kevin MacDonald | Director | 21 Harrison Ave. Newport, R.I. 02840 |
| Keith MacDonald | Director | 21 Harrison Ave. Newport, R.I. 02840 |
| Ronald MacDonald | President | 21 Harrison Ave. Newport, R.I. 02840 |
| | Vice President | |
| Carol MacDonald | Secretary | 21 Harrison Ave. Newport, R.I. 02840 |
| Ronald MacDonald | Treasurer | 21 Harrison Ave. Newport, R.I. 02840 |

SEVENTH: Number of Shares authorized: 4,000

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4,000 | Common | | 0 |

EIGHTH: Number of Shares issued: 200

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | Common | | 0 |

PAID
JAN 18 1991
SEC'Y OF STATE

Dated January 17 19 91

Mac & Bob, Inc.
(Name of Corporation)

By [Signature]
Title Pres

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 000617E Annual Report for the year 1990

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Contracting

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 21 Harrison Avenue, Newport RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|---------------------|----------------|--|
| Ronald M. MacDonald | Director | 21 Harrison Avenue, Newport, RI 02840 |
| Keith MacDonald | Director | 21 Harrison Avenue, Newport, RI 02840 |
| Kevin MacDonald | Director | 21 Harrison Avenue, Newport, RI 02840 |
| Ronald M. MacDonald | President | 21 Harrison Avenue, Newport, RI 02840 |
| | Vice President | |
| Carol MacDonald | Secretary | 21 Harrison Avenue, Newport, RI 02840 |
| Ronald M. MacDonald | Treasurer | 21 Harrison Avenue, Newport, RI 02840 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class |
|---------------|--------|
| 4,000 | common |

Par Value
or statement that
shares are without
par value

no par value

EIGHTH: Number of Shares issued: **FEB 20 1990**

| No. of Shares | Class |
|---------------|--------|
| 200 | common |

Par Value
or statement that
shares are without
par value

no par value

Dated 2/19 19 90

(Name of Corporation)

By Ronald M. MacDonald

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

000617E

1989

Corporate ID _____ Annual Report for the year _____

Mac & Bob, Inc.

FIRST: The name of the corporation is _____

SECOND: It is incorporated under the laws of _____ Rhode Island _____

THIRD: Character of business, briefly stated, is _____ General Contracting _____

FOURTH: If foreign corporation, address of its principal office _____

FIFTH: Business address in Rhode Island _____ 21 Harrison Avenue, Newport, 02840 _____

SIXTH: Names and addresses of its directors and officers: _____ (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------------|----------------|--|
| Ronald M. MacDonald | Director | 21 Harrison Avenue, Newport, RI 02840 |
| Robert P. White | Director | 53 Pinetree Road, Portsmouth, RI 02871 |
| | Director | |
| Ronald M. MacDonald | President | see above |
| Robert P. White | Vice President | see above |
| Patrick O'N. Hayes, Jr. | Secretary | 61 Long Wharf, Newport, RI 02840 |
| Carol MacDonald | Treasurer | |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4,000 | common | | No par value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | common | | No par value |

PAID

FEB 16 1989

REC'D OF STATE

Dated February 1989

Mac & Bob, Inc.

(Name of Corporation)

By Patrick O'N. Hayes Jr.

Title Secretary

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 6176 Annual Report for the year 1988

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Contracting

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 21 Harrison Avenue, Newport 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------------|----------------|--|
| Ronald M. MacDonald | Director | 21 Harrison Avenue, Newport, RI 02840 |
| Robert P. White | Director | 53 Pinetree Road, Portsmouth, RI 02871 |
| | Director | |
| Ronald M. MacDonald | President | see above |
| Robert P. White | Vice President | see above |
| Patrick O'N. Hayes, Jr. | Secretary | 61 Long Wharf, Newport, RI 02840 |
| Carol MacDonald | Treasurer | |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class |
|---------------|--------|
| 4,000 | Common |

Par Value
or statement that
shares are without
par value
No par value

EIGHTH: Number of Shares issued:

| No. of Shares | Class |
|---------------|--------|
| 200 | Common |

Par Value
or statement that
shares are without
par value
No par value

PAID
JAN 27 1988
SECY. OF STATE
JAN 28 1988
SM

Dated January 19 19 88

Mac & Bob, Inc.
(Name of Corporation)

By Patrick O'N. Hayes, Jr.

Title Secretary

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 6176 Annual Report for the year 1987

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting construction work for construction, repairing and remodeling of buildings

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 21 Harrison Avenue, Newport, R.I. 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| Ronald M. MacDonald | President | 21 Harrison Ave., Newport, RI 02840 |
| | Vice President | |
| Patrick O'N. Hayes, Jr. | Secretary | 61 Long Wharf, Newport, RI 02840 |
| Ronald M. MacDonald | Treasurer | 21 Harrison Ave., Newport, RI 02840 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4000 | Common | | No par value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 50 | Common | | No par value |

PAID

MAR 23 1987

SEC'Y OF STATE

Dated March 18, 19 87

MAC & BOB, INC.

(Name of Corporation)

By [Signature]

Title Secretary

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 6176 Annual Report for the year 1986

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting construction work for
contruction, repairing and remodeling of buildings and public work of all
kinds.

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| Ronald M. MacDonald | President | 21 Harrison Ave., Newport, R.I. 02840 |
| | Vice President | |
| Patrick O'N. Hayes, Jr. | Secretary | 61 Long Wharf, Newport, R.I. 02840 |
| Ronald M. MacDonald | Treasurer | 21 Harrison Ave., Newport, R.I. 02840 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class |
|---------------|--------|
| 4000 | Common |

02/26/86

Series

Par Value
or statement that
shares are without
par value
No par value

MAR 15 1986
VA

EIGHTH: Number of Shares issued:

| No. of Shares | Class |
|---------------|--------|
| 50 | Common |

PAID

Series

Par Value
or statement that
shares are without
par value
No par value

ANRE
CHEK
0502A001

Dated 19 86

Mac & Bob, Inc.

(Name of Corporation)

By 15.00

(Report must be signed by an officer)

Title Secretary

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 6176 Annual Report for the year 1985

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to act as a general contractor for the construction, repairing & remodeling of buildings & public work of all kinds.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 21 Harrison Avenue, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| Ronald M. MacDonald | President | 21 Harrison Avenue, Newport, RI 02840 |
| | Vice President | |
| Patrick O'N. Hayes, Jr. | Secretary | 61 Long Wharf, Newport, RI 02840 |
| Carol A. MacDonald | Treasurer | 21 Harrison Avenue, Newport, RI 02840 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4000 | Common | | no par value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 150 | Common | | no par value |

Dated March 15, 19 85

Mac & Bob, Inc.
(Name of Corporation)

RECEIVED MAR 1985

By Ronald M. MacDonald

(Report must be signed by an officer)

Title President

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

**ANNUAL REPORT
OF**

1983

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is MAC & BOB, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 21 Harrison Avenue, Newport, Rhode Island 02840

and the name of its registered agent in Rhode Island at such address is Ronald M. MacDonald

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is general contracting construction work for construction, repairing and remodeling of buildings and public work of all kinds.

SIXTH: The names and respective addresses of its directors and officers are:

| Name | Office | Address |
|-------------------------|----------------|---------------------------------------|
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Ronald M. MacDonald | President | 21 Harrison Ave., Newport, R.I. 02840 |
| | Vice President | |
| Patrick O'N. Hayes, Jr. | Secretary | 61 Long Wharf, Newport, R.I. 02840 |
| Ronald M. MacDonald | Treasurer | 21 Harrison Ave., Newport, R.I. 02840 |

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| Number of Shares | Class | Series | Par Value per Share or Statement that Shares are without Par Value |
|------------------|--------|--------|--|
| 4000 | Common | | No par value |

MAY 5 1984
LC

3064E14...150081

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE,

Annual Report for the year 1982/1983

FIRST: The name of the corporation is MAC & BOB, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting for construction, repairing and remodeling of buildings and public work of all kinds.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 21 Harrison Ave., Newport, R.I.

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

| Name | Office | Address |
|---------------------|----------------|------------------------------------|
| | Director | |
| | Director | |
| | Director | |
| Ronald M. MacDonald | President | 21 Harrison Ave., Newport, R.I. |
| Robert P. White | Vice President | 53 Pine Tree Rd., Portsmouth, R.I. |
| Robert P. White | Secretary | 53 Pine Tree Rd., Portsmouth, R.I. |
| Carol A. MacDonald | Treasurer | 21 Harrison Ave., Newport, R.I. |

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4000 | Common | | No par value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4000 | Common | | No par value |

Dated: March 7, 19 83

MAC & BOB, INC.

(Name of Corporation)

By: *[Signature]*
Title: *[Signature]*

Report must be signed by an officer)

MAR 25 1983
[Handwritten initials]

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is MAC & BOB, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting for construction, repairing and remodeling of buildings and public work of all kinds.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 21 Harrison Ave., Newport, R.I.

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

| Name | Office | Address |
|---------------------|----------------|------------------------------------|
| | Director | |
| | Director | |
| | Director | |
| Ronald M. MacDonald | President | 21 Harrison Ave., Newport, R.I. |
| Robert P. White | Vice President | 53 Pine Tree Rd., Portsmouth, R.I. |
| Robert P. White | Secretary | 53 Pine Tree Rd., Portsmouth, R.I. |
| Carol A. MacDonald | Treasurer | 21 Harrison Ave., Newport, R.I. |

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4000 | Common | | No par value |

JAN 29 1982

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 4000 | Common | | No par value |

Dated: Jan. 20 19 82 Mac & Bob, Inc.

(Name of Corporation)

By *Ronald M. MacDonald*
Title President & Treasurer

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division information. 277-3040

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

MAC & BOB, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Mac & Bob, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
21 Harrison Avenue, Newport, R.I.

and the name of its registered agent in Rhode Island at such address is
Ronald M. MacDonald

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is none

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is general contracting for construction, repairing and remodeling of buildings and public work of all kinds.

SIXTH: The names and respective addresses of its directors and officers are:

| Name | Office | Address |
|---------------------|----------------|------------------------------------|
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| | Director | |
| Ronald M. MacDonald | President | 21 Harrison Ave., Newport, R.I. |
| Robert P. White | Vice President | 53 Pine Tree Rd., Portsmouth, R.I. |
| Robert P. White | Secretary | 53 Pine Tree Rd., Portsmouth, R.I. |
| Carol A. MacDonald | Treasurer | 21 Harrison Ave., Newport, R.I. |

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| Number of Shares | Class | Series | Par Value per Share or Statement that Shares are without Par Value |
|------------------|--------|--------|--|
| 4000 | Common | | No par |

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| <u>Number of Shares</u> | <u>Class</u> | <u>Series</u> | <u>Par Value per Share or Statement that Shares are without Par Value</u> |
|-------------------------|--------------|---------------|---|
| 4000 | Common | | No par |

Dated 2/24, 1981

MAC & BOB, INC.

(NAME OF CORPORATION)

By *Donald J. McDonald*
President

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

MAC & BOB, INC.

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|------------------|--------|--------|--|
| 4000 | Common | 3 | No Par |

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

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|-------------------------|--------------|---------------|---|
| 4000 | Common | | No Par |

Dated *February* 15, 1980

MAC & BOB, INC.
(NAME OF CORPORATION)

By *Ronald Mac Donald*
Its *Pres.*