

A. Ralph Mollis, Secretary of State

Corporations Division 148 W. River Street

Providence, RI 02904-2615

401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No.	2. Exact name of the limited liability company								
146082	DAWSON DECORATIVE PAVEMENT, LLC								
3. State of Formation		4. Brief description of the	character of the business whi	ch is actually c	onducted in Rhode Island	d			
RHODE ISLAND INSTALLATION OF PAVERS AND RETAINING				NG WALLS					
5. Principal office address			· · · · · · · · · · · · · · · · · · ·	City		State		Zip	
792 East Road				North	Scituate	RI		02857	
6. MAILING ADDRES Contact Name	SS OF LI	MITED LIABILITY	COMPANY AND NAME	OR TITLE (ON:		l	
Roy L. Dawson				Member					
Struet Address 792 East Road				City State Zip					
				North	Scituate	RI		02857	
7. NAME AND ADDR	ESS OF	EACH MANAGER O	F THE LIMITED LIABI	LITY COMP	ANY, IF APPLICAB	LE - DO N	OT LIST	MEMBERS	
		FILL IN SPACE	S BEFORE USING ATTA	CHMENTS	("X" BOX FOR ATT	ACHMENT)			
Manager Name			Manager Name						
<u> </u>									
Street Address				Street Address					
205			•						
City	-	State	Zip	City		State		Zip	
Mariana Name	l	***************************************		•••••	•••••			*************************	
Manager Name				Manager Name					
Strevt Address				Street Address					
					•				
City		State	Zip	City		State		Zip	
	l					1		•	
8. RESIDENT AGENT	IN RHO	DDE ISLAND - DO N	OT ALTER - Changes		ing of Form 642 - 1	R.I.G.L. 7-1	6-11		
Agent Name				Address					
				3 AUSTIN AVENUE					
Address				City	lity		Zip		
P.O. BOX 284				GREENVILLE		02828-			

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

File Date FILED	
Check No. SEP 2 5 2007	
FOR SECRETARY OF STATE USE ONLY	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.

Signature of Authorized Person

Roy L. Dawson

Print or Type Name of Authorized Person