



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

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 2008

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&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 64672		2. Name of Corporation O'Connor Constructors, Inc.			
3. Street Address Principal Business Office 45 Industrial Dr			City Canton	State MA	Zip 02021
4. Business Phone No. (617) 364-9000		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island General Contractor, non-residential boiler & turbine					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas H O'Connor Jr			Vice President Name none		
Street Address 55 Pleasant St			Street Address		
City Canton	State MA	Zip 02021	City	State	Zip
Secretary Name Thomas H O'Connor III			Treasurer Name Thomas O'Connor III		
Street Address 24 Prospect St			Street Address 24 Prospect St		
City Seaston	State MA	Zip 02375	City Seaston	State MA	Zip 02375
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Thomas H O'Connor Jr			Director Name Thomas H O'Connor III		
Street Address 55 Pleasant St			Street Address 24 Prospect St		
City Canton	State MA	Zip 02021	City Seaston	State MA	Zip 02375
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
10500	Common	Par 10	3600	Common	Par 10
16000	Preferred	Par 100	-0-	preferred	par 100
60000	Preferred	par 10	-0-	preferred	par 10

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.

FILED

File Date: MAR 04 2008

Check No. By: 095371 KM

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: Thomas H O'Connor III Date: 3-29-08

Title: Secretary