RALPH MOIL	State of Rhode Island Office of the			ns Fee: \$50.00
Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040				
Limited Liability Annual Report Filing Period: Septem				
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.				
ANNUAL REPORT YEAR: 2008				
1. ID No. <u>000127084</u>				
2. Exact Name of the Limited Liability Company KS Electric, LLC				
3. State of Formation				
State:				
 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island <u>ELECTRICIAN CONTRACTOR</u> 5. Principal Office Address 				
No. and Street:	15 VICTORY HIGHWAY			
City or Town:	WEST GREENWICH	State: <u>RI</u>	Zip: <u>02817</u>	Country: <u>USA</u>
6. Mailing Address	of Limited Liability Company a	Ind Name or Tit	le of Contact Pe	erson:
Contact Name: KEI	N SACCOCCIA Contact Title: PI	RESIDENT		
No. and Street:	<u>124 KIMBERLY DRIVE</u> WEST GREENWICH	States DI	7:	Country USA
City or Town:		State: <u>RI</u>	Zip: <u>02817</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name		Addı	ress
	First, Middle, Last, Suffi	x Ado	dress, City or Town, S	tate, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
KEN SACCOCCIA 15 VICTORY HIGHWAY WEST GREENWICH , RI 02817				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				

Signed this 4 Day of September, 2008 at 9:15:45 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>K. F. SACCOCCIA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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