

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 2008

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

* 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.

	subject to a penalty jee of \$25.0				
1. ID No.	2. Exact name of the limited liability company				
109651			CONTRACTOR, LLC		
3. State of Formation RI	4. Brief description of the character of the business which is actually conducted in Rhode Island General contracting				
5. Principal office address			City	State	Zip
130 Sanctuary Road			Charlestown	RI	02813
6. MAILING ADDRES	S OF LIMITED LIABILI	TY COMPANY AND NAM	E OR TITLE OF CONTACT PERSON: Contact Title		
Robert Eric Audette			Manager		
Street Address			Сиу	State	Zip
130 Sanctuary Road			Charlestown	RI	02813
T.	ESS OF EACH MANAGE FILL IN SPA	R OF THE LIMITED LIA ACES BEFORE USING A	ABILITY COMPANY, IF APPLI- TTACHMENTS ("X" BOX FOR Manager Name	CABLE - DO NOT LI ATTACHMENT)	ST MEMBERS
Manager Nume Robert Eri	c Audette		None		
Street Address 130 Sanctu	ary Road		Sireel Address		
Cily Charlestow	n State RI	^{Zip} 02813	City	State	Zip
Manager Nume None			Manager Name None		
Street Address			Street Address		
City	State	Zψ	City	State	Zip
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	I' IN RHODE ISLAND	fice of the Secretary of Sta	ate. Changes require filing of Fo	rm 642 - R.I.G.L. 7-16-1	1
i ms imormation is cu	mentaly of record in the Or	nee or the Beereitary of the	and Changes require many or re-		

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

Eila Data	FILED
File Date Check No.	NOV 03 2008
By:	By 13752
	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 Authorized Person

Dota

Robert Eric Audette

Print or Type Name of Authorized Person