

1. Corporate ID No. 11693

A. Ralpb Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2. Name of Corporation
PARK ELECTRIC COMPANY

2009

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.

3. Street Address Principal Business Office 11 Neutanoconkanut Road			City Johnston	State RI	<sup>Zip</sup> 02919
4. Business Phone No. (401) 944-6687		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island GENERAL ELECTRIC CONTRACTOR					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name			Vice President Name		
Frank DeSimone					
Street Address 11 Neutanoconkanut Road			Street Address		
City Johnston	State RI	<i>х</i> ф <b>02919</b>	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	Cuy	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Frank DeSimone			Louise DeSimone		
Street Address			Street Address		
11 Neutanoconkanut Road			11 Neutanoconkanut Road		
City	State	Zîp	City	State	Zip
Johnston	RI	02919	Johnston	RI	02919
Director Name			Director Name		
Street Address  18 NECTACOKKANUT ROAD  Olay State Zip			Street Address		
City	State	Ζip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)  AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) [] ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series 1	°ar Value	Number of Shares	Class/Series	Par Value
200 NO PAR VALUE			200	Common	No par value
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.					
Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements.					
File Date FILED			contained herein are true and correct.  From 1-18 Sure 1-11-09		
Check No. JAN 1 3 2009			Signature Date Frank DeSimone		
Ву:	7		Print or Type Name		
FOR SECRETARY OF STA	TE USE ONLY		President		
					Form 630 Rev. 12/06