



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 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.

1. Corporate ID No. 18299		2. Name of Corporation ANTHONY A. NUNES, INC.			
3. Street Address Principal Business Office 535 METACOM AVENUE			City BRISTOL	State RI	Zip 02809
4. Business Phone No. 401-253-7209		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island GENERAL CONSTRUCTION					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ALAN A. NUNES			Vice President Name BRUCE W. MORGAN		
Street Address 14 FORT HILL ROAD			Street Address 48 SAMSON LANE		
City BRISTOL	State RI	Zip 02809	City MIDDLETOWN	State RI	Zip 02842
Secretary Name LEILA J. MORGAN			Treasurer Name JANE A. DEVER		
Street Address 48 SAMSON LANE			Street Address 524 NEWMAN AVENUE		
City MIDDLETOWN	State RI	Zip 02842	City SEEKONK	State MA	Zip 02771
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ALAN A. NUNES			Director Name JANE A. DEVER		
Street Address 14 FORT HILL ROAD			Street Address 524 NEWMAN AVENUE		
City BRISTOL	State RI	Zip 02809	City SEEKONK	State MA	Zip 02771
Director Name LEILA J. MORGAN			Director Name JOHN L. FERREIRA		
Street Address 48 SAMSON LANE			Street Address 392 PLEASANT ST.		
City MIDDLETOWN	State RI	Zip 02842	City SOMERSET	State MA	Zip 02726
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 200	Class/Series	Par Value -0-

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 contained herein are true and correct.

Signature Leila J. Morgan Date 1/12/09
Print or Type Name LEILA J. MORGAN
Title SECRETARY

File Date **FILED**
Check No. JAN 14 2009
By 4977
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