

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(e)rd) is

subject to a penalty fee of \$25.00.					
1 Corporate ID No.	2. Name of Corporation				
76476		General Contracti	ng, Inc.		T.,
3. Street Address Principal Busines 8 Remington Street			North Providence	Rhode Island	02904
4 Business Phone No.		5 State of Incorporation			
(401) 727-0455 Rhode Island			<u>d</u>		
6. Brief Description of the Character To provide general 7. NAMES AND ADDRESS	contracting and m	naintenance servic	es to the general pub	lic. Ces before using at	TACHMENTS
President Name			Vice President Name		
Kenneth L. Bostic			Kenneth A. Bostic		
Street Address			Street Address		
P 0 Box 487		T	151 01d Jenckes H		T.,
City	State	Zip	City	State Dhode Telland	02865
Lincoln	Rhode Island	J 02865	Lincoln Treasurer Name	Rhode Island] uzooo
Secretary Name			Kenneth L. Bostic		
Kenneth L. Bostic			Street Address		
Street Address P O Box 487			P 0 Box 487		
Lincoln	Rhode Island	02865	Lincoln	Rhode Island	^{Zφ} 02865
Director Name Street Address			Director Name Street Address		
City:	State	Zip	City	Stetle	Zip
Director Name			Oirector Name		
Street Address			Street Aildress		
City	State	Z4)	City	State	20
9. SHARES AUTHORIZED)	1	10. SHARES ISSUED ("	X" BOX FOR ATTACHM	IENT)
8,000 common	no par value		ISSUED SHARES - THIS SECTION	ON MUST BE COMPLETED	The Contract of the Contract o
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.			Number of Shares	ClasySeries	Par Adrie =
			1,000	Common	NO PAR
This report must be executhis report must be execut	ited on behalf of the corpled on behalf of the corp	poration by an authorize oration by the receiver	ed representative. If the corp or trustee,	poration is in the hands of	of a receiver or trustee,

File Date	FILED
Check No	JAN 2 1 2009
By: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.

		1-21-2009
ignature	Date	

Kenneth L. Bostic

Print or Type Name

President Title