

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&d)) is

subject to a penalty fee of \$25.						
1. Corporate ID No. 487862	2. Name of Cor S.C. Neste	poration el, Inc.				
3. Street Address Principal Business Office 2117 Directors Row			City Indianapolis	State IN	<i>zip</i> 46241	
-r. Business Phone No. 5. State of Incorporation 317-243-6175 IN		n	<u></u>			
. Brief Description of the Cha General Contracting	aracler of Business Condu	cted in Rhode Island		··· <u>-</u>		
. NAMES AND ADDRI	ESSES OF THE OFF	ICERS: ("X" BOX FOR AT	TACHMENT) FILL IN	SPACES BEFORE USIN	IG ATTACHMENTS	
resident Name			Vice President Name			
Charles S. Nestel						
1160 E. 58th St.			Street Address			
ուր ndianapolis	State IN	Ζψ 46220	City	State	Zip	
veretary Name			Treasurer Name	***************************************	***************************************	
Sirvet Address			Street Address	Street Address		
ity	State	Zip	City	State	Zlp	
. NAMES AND ADDRI	ESSES OF THE DIRE	ECTORS: ("X" BOX FOR A	: A <i>TTACHMENT</i>) □ FILL II	 N SPACES BEFORE US	 ING ATTACHMENTS	
Director Name		·	Director Name			
treet Address			Street Address			
TIV:	State	Zip	City	State	Zip	
Firector Name			Director Name			
Street Address			Street Address			
Tty	State	Zip	City	State	Zip	
. SHARES AUTHORIZ	EĎ	1		("X" BOX FOR ATTA		
			201	CTION MUST BE COMPLETE		
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.			f 100	Class/Series	No Par Value	
71						
his report must be exe	cuted on behalf of the	ne corporation by an author e corporation by the receive	ized representative. If the c	corporation is in the har	nds of a receiver or truste	
ns report must be exec	area on benan of the	e corporation by the receive	er or trustee.			
			Under penalty of p	perjury, I declare and affirm	n that I have examined this	
			including any acco	ompanying schedules and the true and correct.	statements, and that all state	
File Date 100 000 00						
File Date FILED			Signalaré	My MIL	Dur	
Theck No.			Ü	14	Date	
FEB 1 7 2009	9			Charles S. Nestel		
By 140	69		Print or Type Name	?		
FOR SECRETARY	OF STATE USE ONLY		President			
	T. STATE COL OTTE		Title			