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FOR SECRETARY OF STATE USE ONLY

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.

. Corporate	penulty fee of \$25.00.	2. Name of Corpor	ation			
	2269		BODYNE COMPANY IN	CORPORATED		
3. Street Address Principal Business Office 4 Industrial Way			City Riverside	State RI	Zip 02915	
4. Business Phone No. 5. State of Incorporation Rhode Island			d			
	cription of the Character letal tube bending a					
		OF THE OFFIC	ERS: ("X" BOX FOR ATTA	CHMENT) [FILL IN SI	PACES BEFORE USING AT	TACHMENTS
President Nanu: Jeanie M. Juckett				Laurie MacLeod		
Street Address 128 Prospect Street				Street Address 11 Rosedale Avenue		
aty S	Seekonk	State MA	ир 02771	City Barrington	State RI	^{Ζίρ} 02806
Secretary Name Laurie MacLeod				Treasurer Name Jeanie M. Juckett		
Street Address 11 Rosedale Avenue			Street Address 128 Prospect Street			
	Barrington	State RI	^{Zip} 02806	City: Seekonk	State MA	^{Ζiρ} 02771
Streetor Nat			TORS: ("X" BOX FOR ATT	Director Name Laurie MacLe		ATTACHMENTS
Street Address 128 Prospect Street			Street Address 11 Rosedale Avenue			
Спу	Saakank	State	Zip 00774	City	State	Zip
Pirector Nat	Seekonk me	.JMA	02771	Barrington Director Name	[RI	[02806
Street Addre	988		······································	Street Address		
Hjr		State	Ziţo	Сиу	State	Zip
9. SHARES AUTHORIZED				10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Scries	Par Value	
State. Changes require an additional filing. See Section 9 of instruction sheet.				7940	Common	\$1.00
This repo	ort must be executed	Lon behalf of the	corporation by an authorize	ad representative. If the co	reporation is in the hands	of a rapping of
			corporation by the receiver		reportation is in the hands t	n a receiver (n t
					rjury, I declare and affirm the	
		· · ·		including any accor contained herein are	npanying schedules and state true and correct.	ments, and that all
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