

A. Ralph Mollis, Secretary of St. Corporations Divis 148 W. River Str Providence, RI 02904-20 401.222.30

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(codd)) is the composition of the composition of the code of the code

subject to a penalty fee of \$25.00.	1501(e), each corporatio	,				
	2. Name of Corporat	lion				
1. Corporate ID No.	Egan and	Son General	Contracting Inc			
0037019 3. Street Address Principal Business (			City	State	Zψ	
122 John Mowr			Smithfield	RI	02917	
4. Business Phone No.	<u>y Road</u>	5. State of Incorporation				
1		Rhode Is.	land			
401 232-7932 6. Brief Description of the Character	of Business Conducted	in Rhode Island				
General Contr 7. NAMES AND ADDRESSES	acting, Ho	ome Repairs al	nd any other Lav	wful Business ACES BEFORE USING AT	TACHMENTS	
President Name			AND A LEGISLAND LICENSE	FILE 1 (Citables Interne		
JAMES R EGAN	_		ARTHUR EGAN			
Street Address			Street Address	TV DAND		
122 JOHN MOWE	RY ROAD		122 JOHN MOW	State State	Zip	
City	State	Zip	City	<u> </u>	1 *	
SMITHFIELD	RI	02917	SMITHFIELD	RI	1 02917	
Secretary Name	Secretary Name			Treasurer Name		
	JAMES R EGAN			JAMES R EGAN		
Street Address			Street Address	1 '		
122 JOHN MOW	RY ROAD		122 JOHN MOW		7/0	
City	State	Zip	City	State	Zip	
	DT	02917	SMITHFIELD	RI	1 02917	
SMITHFIELD 8. NAMES AND ADDRESSE	S OF THE DIREC	TORS: ("X" BOX FOR A	: SMITHFIELD	SPACES BEFORE USING	ATTACRMENTS	
Director Name			Director Name			
				<u></u>		
Street Address			Street Address	Street Address		
City	State	Ζip	City	State	Zip	
Crip						
Director Name			Director Name			
Director mane			<u> </u>			
Court Address	<del> </del>		Street Address			
Street Address						
City	State	Zip	Clay	State	Zip	
City	Ì					
9. SHARES AUTHORIZED	i ·	1 0	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
600 - Com.	men-NO	-PAX	ISSUED SHARES — THIS SEC	ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value	
ji		O CC C al C a neathers :	at I			
This information is curren	tly of record in the	Office of the Secretary	of			
State. Changes require an	tly of record in the additional filing.	Office of the Secretary See Section 9 of	•	Common	NO-PAR	
This information is curren State. Changes require an instruction sheet.	tly of record in the additional filing.	e Office of the Secretary See Section 9 of	600	Common	NO-PAR	
State. Changes require an instruction sheet.	additional filing.	266 Section 3 or	600			
State. Changes require an instruction sheet.	additional filing.	266 Section 3 or	600			
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	600			
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	600			
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	600			
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	orized representative. If the cover or trustee.	orporation is in the hands	of a receiver or truste	
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	orized representative. If the cover or trustee.	orporation is in the hands	of a receiver or truste	
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	600  orized representative. If the cover or trustee.  Under penalty of pincluding any accounts.	orporation is in the hands berjury, I declare and affirm to be mpanying schedules and sta	of a receiver or truste	
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	600  orized representative. If the cover or trustee.  Under penalty of pincluding any accounts.	orporation is in the hands	of a receiver or truste	
State. Changes require an instruction sheet.  This report must be execute this report must be executed.	additional filing.	e corporation by an autho	600  orized representative. If the cover or trustee.  Under penalty of pincluding any accounts.	orporation is in the hands berjury, I declare and affirm to be mpanying schedules and sta	of a receiver or truste	
State. Changes require an instruction sheet.	additional filing.	e corporation by an autho	600  orized representative. If the cover or trustee.  Under penalty of pincluding any accounts.	orporation is in the hands berjury, I declare and affirm to be mpanying schedules and sta	of a receiver or truste	
State. Changes require an instruction sheet.  This report must be execute this report must be execute.	ted on behalf of the	e corporation by an autho	orized representative. If the cover or trustee.  Under penalty of pincluding any accordined herein a significant s	perjury, I declare and affirm to the bands of the bands o	of a receiver or truste	
State. Changes require an instruction sheet.  This report must be execute this report must be executed.	ted on behalf of the	e corporation by an author	600  orized representative. If the cover or trustee.  Under penalty of pincluding any accommodated herein a significant of the contained herein sign	perjury, I declare and affirm to companying schedules and starte true and correct.	of a receiver or truste	
State. Changes require an instruction sheet.  This report must be execute this report must be executed.  File Date FILE C.  Check MAR 0 2 2009	ted on behalf of the	e corporation by an author	Under penalty of pincluding any accordance herein a significant or Type Name	perjury, I declare and affirm to the mands affirm to the manying schedules and state true and correct.	of a receiver or truste	
State. Changes require an instruction sheet.  This report must be execute this report must be executed.  File Date FILES  Check MAR 0 2 2009  By: By 2909	ted on behalf of the	e corporation by an author	600  orized representative. If the cover or trustee.  Under penalty of pincluding any accommodated herein a significant of the contained herein sign	perjury, I declare and affirm to the mands affirm to the manying schedules and state true and correct.	of a receiver or truste	
State. Changes require an instruction sheet.  This report must be execute this report must be executed.  File Date FILE C.  Check MAR 0 2 2009	ted on behalf of the	e corporation by an author	Under penalty of pincluding any accordance herein a significant or Type Name	perjury, I declare and affirm to the mands affirm to the manying schedules and state true and correct.	of a receiver or truste	