

A. Ralph Mollis, Secretary of Stat Corporations Divisio. 148 W. River Stree Providence, RI 02904-261

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.

401.222.304

1. Corporate ID No. 128300	Walsh Cons	2. Name of Corporation Walsh Construction Company				
3. Street Address Principal Business Office 929 West Adams Street			City Chicago	State Illinois	<i>гір</i> 60607	
(312)563.5400 Illinois		l l	n			
 Brief Description of the C Construction and ge 	baracter of Business Conduction neral contracting service	ed in Rhode Island C es				
President Name	RESSES OF THE OFFIC	ERS: ("X" BOX FOR AT	TACHMENT) FILL IN Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
Daniel J Walsh Street Address						
929 West Adams Street			Street Address			
^{City} Chicago	State Illinois	<i>⊠p</i> 60607	City	State	Zip	
Secretary Name Matthew M Walsh IV			Treasurer Name Timothy S. Gerken			
Street Address 929 West Adams Street			Street Address 929 West Adams Street			
City Chicago	State Illinois	^{Zip} 60607	City Chicago	State Illinois	<i>Ζψ</i> 60607	
B. NAMES AND ADDI Director Name Matthew Walsh	RESSES OF THE DIREC	TORS: ("X" BOX FOR A	TTACHMENT) FILL II Director Name	N SPACES BEFORE USIN	1	
Street Address 929 West Adams S	treet		Street Address			
_{യു} Chicago	State Illinois	<i>2ip</i> 60607	City	State	Zip	
Director Name Daniel J. Walsh			Director Name			
Street Address 929 W. Adams Stre	eet		Street Address			
	State Illinois	^{Zip} 60607	City	State	Zip	
City Chicago		•		("X" BOX FOR ATTACE		
•	ZED		ISSUED SHARES — THIS SE	CTION MUST BE COMPLETED)	
Chicago SHARES AUTHORIS This information is cu		Office of the Secretary of		Class/Series	Par Value	

File Date FILED Check No. MAR 0 6 2009 FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare an including any accompanying schedul	nd affirm that I have examined this reported that I have examined this reported that all statements, and that all statements.
contained hereig are tree and correct	
Signature TIMOTUY S. GOEN	Date
Print or Type Name TRONSOVER	
Title	Form 630 Rev. 08/08