

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2009

Filing Period: September 1 - November 1 - Filing Fee: \$50.00\* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 160865	1	ct name of the limited liability company on Electrical Contractors, LLC				
3. State of Formation 4. Brief description of the character of the business  Rhode Island Electrical contractors			iness which is actually conducted in Rho	which is actually conducted in Rhode Island		
5. Principal office address 50 Aberdeen Street			City West Warwick	State RI	Zip 02893	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAM Contact Name  Joseph Henry Janton IV			NAME OR TITLE OF CONTACT  Contact Title  Manager	Contact Title		
Street Address 50 Aberdeen Street			<i>сиу</i> West Warwick	State RI	<sup>Zip</sup> 02893	
7. NAME AND ADDI		GER OF THE LIMITED SPACES BEFORE USIN	LIABILITY COMPANY, IF APP G ATTACHMENTS ("X" BOX FO	PLICABLE - <u>DO NO</u> TOR ATTACHMENT)		
Manager Name Joseph Henry Janton IV			Manager Name	Manager Name		
Street Address 50 Aberdeen Street			Street Address	Street Address		
City West Warwick	State RI	<i>2ip</i> 02893	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
l	rently of record in the	Office of the Secretary o	f State. Changes require filing of I	Form 642 - R.I.G.L. 7-	16-11	

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**160865** 

 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.

Joseph H Jan Lore 10 Jignature of Authofized Person

9-12-09 Date

Joseph Henry Janton IV

Manager

Print or Type Name of Authorized Person