



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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. 421812		2. Exact name of the limited liability company Brady Sullivan Contracting, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island To engage in construction and contracting activities			
5. Principal office address 670 N. Commercial Street, Suite 303		City Manchester	State NH	Zip 03101	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Shane D. Brady			Contact Title Manager		
Street Address 670 N. Commercial Street, Suite 303		City Manchester	State NH	Zip 03101	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name Shane D. Brady			Manager Name Arthur W. Sullivan		
Street Address 670 N. Commercial Street, Suite 303			Street Address 670 N. Commercial Street, Suite 303		
City Manchester	State NH	Zip 03101	City Manchester	State NH	Zip 03101
Manager Name Christopher J. Starr			Manager Name		
Street Address 90 Concord Avenue			Street Address		
City Belmont	State MA	Zip 02478	City	State	
8. RESIDENT AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11					

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SECRETARY OF STATE
CORPORATIONS DIV
2009 OCT 23 AM 11:39

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

421812

File Date	FILED ^c
Check No.	OCT 23 2009
By:	By 102104
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Authorized Person: Shane D. Brady Date: 10-14-09
Shane D. Brady, Manager
Print or Type Name of Authorized Person