

FOR SECRETARY OF STATE USE ONLY

2. Name of Corporation

1. Corporate ID No.

000017855

Amended

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

Form 630 Rev. 08/08

2009 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Northern Constuction Co., Inc.

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(cc²d)) is subject to a penalty fee of \$25.00.

000011033				T .	1 20
3. Street Address Principal Business Office 151 Rocky Hill Road			No. Smithfield	State RI	^{Zip} 02896
Business Phone No.		5. State of Incorporation			
(401) 769-2800 Rhode Island				<u> </u>	
Brief Description of the Character of General Constructi	ion				
. NAMES AND ADDRESSES	OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) FILL IN SPACE	ES BEFORE USING	ATTACHMENTS
resident Name			Vice President Name n/a		
Roger C. Therien			<u>:</u>		
Street Address			Street Address		
151 Rocky Hill Roa		· · · · · · · · · · · · · · · · · · ·		State	Zip
No. Smithfield	State RI	^{Zip} 02896	City Treasurer Name		
Secretary Name Roger C. Therien			Roger C. Therien		
Street Address			Street Address		
151 Rocky Hill Road			151 Rocky Hill Road		
City	State	Zip	City	State	A
No. Smithfield B. NAMES AND ADDRESSES	RI OF THE DIRECT!	02896 ORS: ("X" BOX FOR AT)	No. Smithfield FACHMENT) FILL IN SPA	RI ACES BEFORE USI	
Director Name			Director Name		
Roger C. Therien			Street Address		
Street Address			- GH CEL MUUFESS		
151 Rocky Hill Ro		7/0	City	State	Zip
City No. Smithfiold	State RI	^{Zip} 02896	:		
No. Smithfield RI 02896 Director Name			Director Name		
Street Address			Street Address	<u> </u>	
				T Contra	Zip
City	State	Zip	City	State	<i>z.p</i>
		1	10 STADES TESTINGS (")	 ROY FOD ATTA	 CHMENT): □
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
This information is currently	y of record in the (Office of the Secretary of	minuter of sources		
State. Changes require an additional filing. See Section 9 of instruction sheet.			600.00	CNP	0.00
			19 15 15 A		
This report must be executed this report must be executed	i on behalf of the on behalf of the c	corporation by an authorize orporation by the receiver	Under penalty of perju	ıry, I declare and affir	m that I have examined this r
		NOV 27 2009	including any accomp contained herein are to	rue and correct.	statements, and that all states
File Date	<u> </u>	9m)	X Signature	(1 hi.	Date
Check No:	: :	FX11:37	Roger C. The Print or Type Name	erien	
Ву		∸ 1 •	President		
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Title



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

