



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

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010**

**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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 15413		2. Name of Corporation L.A. Patterson Inc.	
3. Street Address Principal Business Office 1401 Boston Neck Road		City Saunderstown	State R.I.
4. Business Phone No. (401)295-5121 or 294-1306		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island Excavation and site work related to construction. Water, sewer, drainage, installations, ISDS installations.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Allegra J. Patterson		Vice President Name Daniel W. Patterson	
Street Address 1401 Boston Neck Road		Street Address 332 South County Trail	
City Saunderstown	State R.I.	City Exeter	State R.I.
Zip 02874	Zip 02822		
Secretary Name Allegra J. Patterson		Treasurer Name Allegra J. Patterson	
Street Address 1401 Boston Neck Road		Street Address 1401 Boston Neck Road	
City Saunderstown	State R.I.	City Saunderstown	State R.I.
Zip 02874	Zip 02874		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Lanny A. Patterson		Director Name Allegra J. Patterson	
Street Address 1401 Boston Neck Road		Street Address 1401 Boston Neck Road	
City Saunderstown	State R.I.	City Saunderstown	State R.I.
Zip 02874	Zip 02874		
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip	Zip		
9. SHARES AUTHORIZED 1,000		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		ISSUED SHARES — THIS SECTION MUST BE COMPLETED	
		Number of Shares 1,000	Class/Series Common
			Par Value No Par Value

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

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: Allegra J. Patterson Date: 2-14-2010  
Print or Type Name: Allegra J. Patterson  
Title: Pres./Treas./Sec.

File Date: **FILED**  
Check No.: **FEB 17 2010**  
By: 20420  
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