



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. 150017		2. Name of Corporation Rycram Construction Co. Inc.			
3. Street Address Principal Business Office 597 State Road			City Dartmouth	State MA	Zip 02747
4. Business Phone No. 508-996-3320		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island Erecting, installing, constructing or altering above ground and inground swimming pools, ponds, hot tubs, spas, whirlpool tubs and baths of all types					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Paul S. Flanagan			Vice President Name None		
Street Address 32 Wilson Street			Street Address		
City Dartmouth	State MA	Zip 02748	City	State	Zip
Secretary Name Paul S. Flanagan			Treasurer Name Bernice M. Flanagan		
Street Address 32 Wilson Street			Street Address 32 Wilson Street		
City Dartmouth	State MA	Zip 02748	City Dartmouth	State MA	Zip 02748
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Paul S. Flanagan			Director Name Bernice M. Flanagan		
Street Address 32 Wilson Street			Street Address 32 Wilson Street		
City Dartmouth	State MA	Zip 02748	City Dartmouth	State MA	Zip 02748
9. SHARES AUTHORIZED					
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.			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			2,000		

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.

File Date 2-18-2010
Check No. 1180
By: MMC
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 [Signature] Date 2-17-10
Print or Type Name Paul S. Flanagan
Title President