



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 2009

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. 120043		2. Name of Corporation Corcoran-Morgera Construction, Inc.			
3. Street Address Principal Business Office 31 America's Cup Avenue			City Newport	State RI	Zip 02840
4. Business Phone No. 4018470872		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island carpentry and construction business					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Garth Morgera			Vice President Name James H. Corcoran		
Street Address c/o 31 America's Cup Avenue			Street Address c/o 31 America's Cup Avenue		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
Secretary Name Garth Morgera			Treasurer Name James H. Corcoran		
Street Address c/o 31 America's Cup Avenue			Street Address c/o 31 America's Cup Avenue		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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 500	Class/Series common	Par Value no par value

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 2010 APR - 7 AM 10:02
 RECEIVED
 CORPORATIONS DIV
 SECRETARY OF STATE
 CORPORATIONS DIV

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.

10:06

FILED
File Date APR 15 2010
Check No. _____
By: 116246
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.

4/11/10
 Signature _____ Date _____
 James H. Corcoran
 Print or Type Name
 Vice President
 Title