



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

A. Ralph Mollis, Secretary of State
Corporations Division
168 W. River Street
Providence, RI 02904-2615
(401) 222-3000

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

1. Corporate ID No. 39417		2. Name of Corporation KEVIN & CRAIG INC			
3. Street Address Principal Business Office 25 SIMMONS ROAD			City LITTLE COMPTON	State RI	Zip 02837
4. Business Phone No. 401-265-8178		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island GENERAL CONTRACTORS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CRAIG S HIBBAD			Vice President Name KEVIN DOYLE		
Street Address 25 SIMMONS ROAD			Street Address 52 COLONIAL AVE		
City LITTLE COMPTON	State RI	Zip 02837	City TIVERTON	State RI	Zip 02878
Secretary Name KEVIN DOYLE			Treasurer Name CRAIG S HIBBAD		
Street Address 52 COLONIAL AVE			Street Address 25 SIMMONS ROAD		
City TIVERTON	State RI	Zip 02878	City LITTLE COMPTON	State RI	Zip 02837
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NO DIRECTORS			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 2,000 Comm No PAR VALUE			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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 1200	Class Series common	Par Value no par

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	FILED
Check No.	JAN 04 2011
By:	By <i>[Signature]</i>
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] **CRAIG S HIBBAD**
Signature Print or Type Name
PRESIDENT
Title
Date **1/3/11**