

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 2011

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

1. Corporate ID No. 39194	2. Name of Corporation WILLIAM T. CALABRO BUILDERS, INC.				
3. Street Address Principal Business Office 85 PROSSER TRAIL			CHARLESTOWN	State RI	<i>Σip</i> 02813
4. Business Phone No. 5. State of Incorporation (401) 364-9735 RHODE ISLAND				02013	
6. Brief Description of the Characte. CONSTRUCTION	r of Business Condu	icted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name WILLIAM T. CALABRO			ACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  WILLIAM T. CALABRO		
Street Address 85 PROSSER TRAIL			Street Address 85 PROSSER TRAIL		
CHARLESTOWN	State RI	<sup>Ζψ</sup> <b>02813</b>	City CHARLESTOWN	State RI	<sup>Zip</sup> 02813
Secretary Name BETH Y. CALABRO			Treasurer Name BETH Y. CALABRO		
Street Address 85 PROSSER TRAIL			Street Address 85 PROSSER TRAIL		
CHARLESTOWN	State RI	<sup>2ip</sup> 02813	CHARLESTOWN	State RI	7tp 02813
8. NAMES AND ADDRESSES  Director Name  NONE	OF THE DIRE	ECTORS: ("X" BOX FOR AT	TACHMENT) THE IN SI Director Name	PACES BEFORE USIN	G ATTACHMENTS
Street Address			Street Address		
City	State RI	Zip	City	State	Zip
Director Name	· #. i · Y		Director Name		
Street Address			Street Address		
City	State	Zip	СПу	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED (" ISSUED SHARES — THIS SECTION	 X" BOX FOR ATTACE IN MUST BE COMPLETED	HMENT) [
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.			Number of Shares	Class/Series	Par Value
			200	COMMON	NO PAR VALUE
T1 .					
this report must be executed his report must be executed of	on behalf of the	e corporation by an authorize corporation by the receiver of	d representative. If the corport trustee.	oration is in the hands	of a receiver or trustee,

File Date	FILED
Check No	JAN 26 2011
By:	FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affi including any accompanying schedules and contained herein are true and correct.	rm that I have examined this report, d statements, and that all statements
Signature AND THE	1-21-11 Date
WILLIAM T. CALABRO	Dure
Print or Type Name	
PRESIDENT	
Title	