



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. 000088956		2. Name of Corporation Carlin Contracting Co., Inc.			
3. Street Address Principal Business Office 454 Boston Post Rd			City Waterford	State CT	Zip 06385
4. Business Phone No. 860-443-5337		5. State of Incorporation CT			
6. Brief Description of the Character of Business Conducted in Rhode Island To carry on and conduct a general construction business					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Brian J. Carey			Vice President Name Nelson Haeseler		
Street Address PO Box 300			Street Address PO Box 300		
City Waterford	State CT	Zip 06385	City Waterford	State CT	Zip 06385
Secretary Name Mona Carey			Treasurer Name Brian Carey		
Street Address PO Box 300			Street Address PO Box 300		
City Waterford	State CT	Zip 06385	City Waterford	State CT	Zip 06385
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Brian Carey			Director Name Mona Carey		
Street Address PO Box 300			Street Address PO Box 300		
City Waterford	State CT	Zip 06385	City Waterford	State CT	Zip 06385
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 9000					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares 4000		Class/Series CWP		Par Value 10.00	
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.					

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.

FILED
APR 11 2011
By 142178

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

Date

BRIAN J CAREY

Print or Type Name

PRESIDENT

Title

File Date

Check No.

By:

FOR SECRETARY OF STATE USE ONLY