

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 201\
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 precribed by law (R.I.G.L. 7-1.2-1501).

| subject to a penalty fee of \$25.00. | - 201(c); caen corporation j | | iuai report within thirty (30) days aft | er the time prescribed by law (R | 1.G.L. 7-1.2-1501(c&d)) is |
|--|------------------------------|----------------------|--|----------------------------------|----------------------------|
| 131799 2. Name of Corporation KCLP CONSTRUCTION INC. LLC | | | | | |
| | Office C WAY | | COVENTRY | State | OZ816 |
| 4. Business Phone No. 401 - 225-0625 5. State of Incorporation RHODE | | | - ISLAND | | |
| 6. Brief Description of the Character of Business Conducted in Rhode island GENERAL CONTRACTOR. | | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name | | | | | |
| MATTHEW C WALTHER Street Address | | | NONE | | |
| 49 LEISURE WAY | | | Street Address | | |
| COVENTRY | State K | 202816 | Сйу | State | Ζip |
| MATTHEW C WALTHER | | | Tregsurer Name MATTHEW C WALTHER | | |
| Street Address 49 LEISURE WAY | | | Street Address 49 LEISURE WAY | | |
| COVENTRY | State R1 | ^{Z40} 02816 | COVENTRY | State RI | Z4902816 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name | | | | | |
| | | | Director traine | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zψ |
| Director Name | J | ·J | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 9. SHARES AUTHORIZED | | | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED | | |
| 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 |
| | | | 100 | NOPARVALUE | |
| | | | | | |
| 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. | | | | | |
| | | | | | |
| Under penalty of perjury, I declare and affirm that I have examined this report, | | | | | |
| including any accompanying schedules and statements, and that all sta | | | | | |
| File Date | | | Signature General Park 9-27-11 | | |
| Check No. SEP 2 9 2 | 011 | | MATHEW C WALTHER | | |
| Ву: | 117 | _ | Print or Type Name | | |
| FOR SECRETARY OF STATE USE ONLY Title | | | | | |