



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 2012

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. 147148		2. Name of Corporation M. Ernst Excavating, Inc.			
3. Street Address Principal Business Office P.O. Box 1015			City New Shoreham	State Rhode Island	Zip 02807
4. Business Phone No. 401-466-5638		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Excavating and Construction					
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael D. Ernst			Vice President Name Kerkyra R. Ernst		
Street Address P.O. Box 1015			Street Address P.O. Box 1015		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
Secretary Name Kerkyra R. Ernst			Treasurer Name Michael D. Ernst		
Street Address P.O. Box 1015			Street Address P.O. Box 1015		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael D. Ernst			Director Name Michael D. Ernst		
Street Address P.O. Box 1015			Street Address P.O. Box 1015		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
Director Name Michael D. Ernst			Director Name Michael D. Ernst		
Street Address P.O. Box 1015			Street Address P.O. Box 1015		
City New Shoreham	State RI	Zip 02807	City New Shoreham	State RI	Zip 02807
9. SHARES AUTHORIZED					
10. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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	
		300	a	\$0.01	

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 CORPORATIONS DIV
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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

File Date: **MAR 28 2012**

Check No. **BY [Signature]**

By: **2855**

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]
Signature _____ Date _____

Print or Type Name
Michael D. Ernst
Title _____