

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2012

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.		2. Exact name of the limited liability company				
543364	GM BER	GM BERARD & SONS CONSTRUCTION, LLC				
3. State of Formation	4. Brief desc	Brief description of the character of business conducted in Rhode Island				
Rhode Island	INTERIO	INTERIOR AND EXTERIOR CONSTRUCTION, RENOVATION AND REMODELING				
5. Principal office address 25 Shirley Drive			City Cumberland	State RI	Zip 02864	
6. MAILING ADDRESS OF I	LIMITED LIABILIT	Y COMPANY AND NA	ME OR TITLE OF CONTACT PI	ERSON:		
Contact Name Gregory M. Berard			Contact Title Operating Manager	Contact Title Operating Manager		
treet Address 25 Shirley Drive		City Cumberland	State RI	Zip 02864		
7. LIST <u>ALL</u> MANAGERS (I ("X" BOX FOR ATTACHI		RESSES) OF THE LIN	MITED LIABILITY COMPANY, IF	APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name Gregory M. Berard			Manager Name	Manager Name		
Street Address 25 Shirley Drive			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Cumberland	RI	02864			- (p	
Cumberland	1		Manager Name		24	
Cumberland Manager Name	1		Manager Name Street Address		2-1 P	
Cumberland Manager Name Street Address City	1			State	Zip $\frac{c}{c}$	
Cumberland Manager Name Street Address	RI	02864	Street Address	State	Zip &	

FILED 1240 OCT 2 2 2012 BY 161572

File Date	this report, including any accompanying schedules and statements and the all statements contained herein are true and correct.		
Check No	Deepo M June 09/26/2012		
Bv:	Signature of Authorized Person Date		
FOR GEORGE BY OF STATE USE ONLY	GRÉGØRY M. BERARD		
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012