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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • **This report must be typed or printed legibly.**
Filing Fee: $50.00 • **FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation		
12286	ELAD CONSTRUCTION CO., INC.		
3. Principal office address: P.O. Box 74	City: Warren	State: RI	Zip: 02885
4. Business Phone No.: 401-253-6399	5. State of Incorporation: Rhode Island		

6. Brief description of the character of business conducted in Rhode Island
To engage in the business of building and contracting

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Alayne Barnicoat	P.O. Box 74	Warren	RI	02885

Vice-President Name	Street Address	City	State	Zip
Alayne Barnicoat	P.O. Box 74	Warren	RI	02885

Secretary Name	Street Address	City	State	Zip
Alayne Barnicoat	P.O. Box 74	Warren	RI	02885

Treasurer Name	Street Address	City	State	Zip
Alayne Barnicoat	P.O. Box 74	Warren	RI	02885

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Alayne Barnicoat	P.O. Box 74	Warren	RI	02885
Victoria Drew	10 Lafayette Street	Pawtucket	RI	02860

Director Name	Street Address	City	State	Zip
Dale Lesh	P.O. Box 74	Warren	RI	02885
Ian Drew	23 S. Atlantic Avenue	Warwick	RI	02888

9. SHARES AUTHORIZED:

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
250	common	no par

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.

FOR SECRETARY OF STATE USE ONLY
Filed Date
Check No.
By:

FILED
FEB 20 2013
BY 2991

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.

Alayne Barnicoat 2/13/13
Signature of Authorized Representative Date

Alayne Barnicoat
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012