

1. Corporate ID No. **62996** 

3. Street Address Principal Business Office 1194 East Main Rd

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

02871

2. Name of Corporation
Norbury Construction Company, Inc.

State RI

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filling Period: January 1 - March 1 • Filling 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.

City Portsmouth

401 683 6850		Rhode Island				
6. Brief Description of the C construction and bui		ucted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Paul A. Norbury			ACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name			
Street Address 1194 East Main Rd			Street Address			
City Portsmouth	State RI	<sup>Zip</sup> 02871	City	State	Zip	
Secretary Name Paul A. Norbury			Treasurer Name Paul A. Norbury			
Street Address 1194 East Main Rd			Sireet Address 1194 East Main Rd			
City Portsmouth	State RI	<sup>Zip</sup> 02871	City Portsmouth	State RI	<sup>Zip</sup> 02871	
8. NAMES AND ADDE Director Name	RESSES OF THE DIR	ECTORS: ("X" BOX FOR ATT	TACHMENT)   FILL I Director Name	N SPACES BEFORE USIN	IG ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Спу	State	Zip	
9. SHARES AUTHORI	ZED I			 	_	
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	
			200	common	no par value	
		he corporation by an authorize te corporation by the receiver		corporation is in the hand	is of a receiver or trustee,	
	cuted on behan of th	te corporation by the receiver	or trustee.			
				perjury, I declare and affirm	that I have examined this repor	
		FEB 0 5 20	والمراجع والمراجع المراجع والمراجع والم	ompanying schedules and a	atements, and that all statemen	
File Date	<del></del>	- DV / FG _ DU	Signature Signature		2/3//5 Date	
Check No.		BY 159 30	Paul A. Nor			
Ву:			Print or Type Nam  President	e		
FOR SECRETARY	Y OF STATE USE ONLY		i residerit			

Title