



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 2016**

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. <b>82666</b>		2. Exact name of the Corporation <b>BRIDAN CORPORATION</b>			
3. Principal office address <b>160 FRANKLIN STREET, PO BOX 251</b>		City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>	
4. Business Phone No. <b>401-253-8500</b>		5. State of Incorporation <b>RHODE ISLAND</b>			
6. Brief description of the character of business conducted in Rhode Island <b>SPECIALIZE IN THE MARKETING, SALE, AND INSTALLATION OF BATHTUB LINERS, WALL UNITS, SHOWER STALLS AND RELATED PRODUCT AND SERVICES.</b>					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>JOHN DANIEL KEATING</b>			Vice-President Name <b>CHRISTOPHER P. KEATING</b>		
Street Address <b>10 TIGER LILY TRAIL</b>			Street Address <b>60 HOLLY CIRCLE</b>		
City <b>REHOBOTH</b>	State <b>MA</b>	Zip <b>02769</b>	City <b>TIVERTON</b>	State <b>RI</b>	Zip <b>02878</b>
Secretary Name <b>JOHN BRIAN KEATING</b>			Treasurer Name <b>ANDREW J. KEATING</b>		
Street Address <b>12 BROWNELL STREET</b>			Street Address <b>11 ECHO FARM DRIVE</b>		
City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	COMMON	NO PAR VALUE
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					

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  
MAY 09 2016  
BY **KL 13748**  
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 of Authorized Representative

Date

**JOHN DANIEL KEATING**

Print or Type Name of Authorized Representative