

Matthew A. Brown, Secretary of State Curporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 2. Name of Corporation 1. Corporate ID No. 111005 Keach Framing Inc. Zip 3. Street Address Principal Business Office City State 37 CORIANDER LANE NORTH KINGSTOWN RΙ 02852 4. Business Phone No. 5. State of Incorporation 6. SIC Code RHODE ISLAND 3236 4018854505 7. Brief Description of the Character of Business Conducted in Rhode Island BUSINESS OF GENERAL CONTRACTOR BENOVIES AND ADDRESSES OF THE OFFICERS AND BOX FOR THAT CHMENTS IT THE INSPACES DEPOREUSING ATTACHMENTS President Name Vice President Name Erin K. Keach David S. Keach Street Address Street Address 37 Coriander Lane .37 Coriander Lane Zip City State Zip City State RI 02852 North Kingstown RΙ 02852 North Kingstown Secretary Name Treasurer Name Erin K. Keach David S. Keach Street Address Street Address 37 Coriander Lane . 37 Coriander Lane City State Zip City State Zip RI RI 02852 North Kingstown North Kingstown 02852 TORS (EXPROX ESTRUCTES AND SERVING elegatars in the in the Director Name Director Name Erin K. Keach David S. Keach Street Address Street Address 37 Coriander Lane 37 Coriander Lane City State Zip State Zip North Kingstown 02852 North Kingstown 02852 Director Name Director Name Street Address Sireei Address Žφ State 10 SHARES AUTHORIZED II. SHARES ISSUED FORATAZIIME **AUTHORIZED SHARES** ISSUED SHARES Number of Shares Class/Series Number of Shares Class/Series Par Value

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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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1 1 1 0 0 5	Under penalty of perjury, I declare

File Date_	2-14-05	
Check No	2272	_
By:	$\mathcal{K}_{\mathcal{B}}$	_
OR SECR	RETARY OF STATE USE ONLY	

1,000 NO PAR VALUE

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.

COMMON

Signature of Officer

Erin K. Keach

Print or Type Name of Officer

President

Form 630 12/01

NONE



Check No.

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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Erin K. Keach
Print or Type Name of Officer

Form 630 12/01

President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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1. Corporate ID No. 2. Name of Corporation						
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4. Business Phone No. 5. State of Incorporat					6. SIC Code	
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7. Brief Description of the Charac BUSINESS OF GENERAL	eer of Business Conduction CONTRACTOR.	ed in Rhode Island		,		
8. NAMES AND ADDRESS President Name	ES OF THE OFFICE	RS ("X" BOX FOR AT	TACHMENT) FILL IN SPACE Vice President Name	S BEFORE USING A	TTACHMENTS	
Erin K. Keach			4			
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37 Coriander Lane			•			
City	State	Zip	City	State	Zip	
North Kingstown	RI	02852	Treasurer Name			
Secretary Name David S. Keach			Erin K. Keach			
			Street Address	·		
Smeel Address 37 Coriander Lane			37 Coriander Lane			
City	State	Zip	*City	State	Zip	
North Kingstown	RI	02852	.North Kingstown	RI	02852	
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Erin K. Keach	•		•			
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37 Coriander Lane			•			
City	State	Zip	·City	State	Zip	
North Kingstown	RI	02852				
Director Name	<i></i>		Director Name			
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f (62)8 (100) 1	118(1.88))) 88(8) 8(1) 88(1			•		
+ 1 1	1 0 0 5 *		Under penalty of perjury			
	·	_	this report, including an			
111005 DBC7	#0 F: 7 PM		and that all statements o	ontained herein are t	rue and correct.	
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INCT 16	2003		Signature of Officer	JEXK /	Date	
Check No.	<u> </u>		22 MUNUTURA 114	KYST.H		
by M9000			Print or Type Name of Officer			
B <u>y:</u>			TRANSTODENT			
FOR SECRETARY OF STATE USE ONLY			Time of Officer Form 630 12/0			
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Filing Period: January 1 - March 1 Filing Fee: \$50.00

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401 222 3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation Keach Framing Inc. *111005* 3. Street Address Principal Business Office Zip City State 37 CORIANDER LANE NORTH KINGSTOWN RI 02852-4. Business Phone No. 5. State of Incorporation 6. SIC Code RHODE ISLAND 4018854505 7. Brief Description of the Character of Business Conducted in Rhode Island BUSINESS OF GENERAL CONTRACTOR. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Erin K. Keach Street Address Street Address 37 Coriander Lane State Zip State Zip City City North Kingstown RI 02852 Treasurer Name Secretary Name Erin K. Keach Davis S. Keach Street Address Street Address 37 Coriander Lane .37 Coriander Lane *City State Zip City State Zip 02852 02852 North Kingstown RI North Kingstown RI 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Erin K. Keach · Street Address Street Address 37 Coriander Lane State Zip ·City City State Zip 02852 RI North Kingstown Director Name Director Name Street Address Street Address State City State Zip City Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Number of Shares Par Value Class/Series Par Value Class/Series 1,000 NO PAR VALUE 1,000 Common None This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee 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. *111005 DBC7/1 4021:333 File Date_ SEP 11 2002 Check No. FOR SECRETARY OF STATE USE ONE Title of Officer Form 630 12/01



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(FORM MUST BE TYPED IN BLACK)				
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3. Street Address Principal Business Off	nce .		Clty	State	Zip
37 Coriander La	.ne		North Kingstown	RI	02852
4. Business Phone No.		S. State of Incorporation			6. SIC Code
(401) 885-4505		Rhode Islan	ıd		
7. Brief Description of the Character of	Business Conducted in Rhoo	fe Island			
General Contrac	tor				
8. NAMES AND ADDRESSE President Name	S OF THE OFFICER	S ("X" BOX FOR ATTACHN	IENT) FILL IN SPACES BEFO Vice President Name	DRE USING ATTACHME	INTS
Erin K. Keach					
Street Address 37 Coriander La	ne		Street Address		
City	State	Zip	City	State	Zip
North Kingstown	RI	02852			
Secretary Name			Treasurer Name		
David S. Keach		٠, ٠٠	Erin K. Keach		
Street Address			Street Address		
37 Coriander La	ine		37 Coriander La	ine	
City	State	Zip	City	State	Zip
North Kingstown	RI	02852	North Kingstown	RI	02852
9. NAMES AND ADDRESSE Director Name	S OF THE DIRECTO	ORS (*X* BOX FOR ATTAC	HMENT) FILL IN SPACES BE Director Name	EFORE USING ATTACHN	MENTS
Erin K. Keach Street Address	<i>,</i>		Street Address	·	
37 Coriander La	ine				
City	State	Zip	City	State	ZIp
North Kingstown Director Name	n RI	02852	. Director Name		
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10. SHARES AUTHORIZED AUTHORIZED SHARES	(*X* BOX FOR ATTACHE	AENT)	11. SHARES ISSUED ("X" B	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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File Date:	1567	
Check No.:	7.	
By:	DE STATE LISE ONLY	

Common

None

1,000

Under pensity 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.

Common

that all statements contained herein are to	rue and correct.
Cun K. Kench	2/20/02
Signature of Officer	Date
ERINK KEACH	
Print or Type Name of Officer	

Title of Officer

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None



Filing Period: January 1-March 1 • Filing Fee: \$50.00

2. Name of Corporation

Keach Framing, Inc.

(FORM MUST BE TYPED IN BLACK)

3. Street Address Principal Business Office

37 Coriander Lane

1. Corporate II No.

File Date: .

FOR SECRETARY OF STATE USE ONLY

James R. Langevin, Secretary of State Corporations Division forth Main Street, Providence, RI 02903-1335 401-222-3040

State

RI

	Office of the Secretary of State	INTATIONS			100 North Main
• • • •					
	FIT CORPORATION		FOR	THE	YEAR 2001



02852

4. Business Phone No.		S. State of Incorporat			6. SIC Code	
(401) 88:-4505 Rhode Isla			and			
7. Brief Description of the Character General contracte		in Rhode Island				
8. NAMES AND ADDRES	SES OF THE OFF	ICERS ("X" BOX FOR AT	TACHMENT) FILL IN SPACES BI	EFORE USING ATTA	CHMENTS	
President Name			Vice President Name			
Erin K. Keach						
Street Address	•		Street Address		•	
37 Coriander Lan	e					
City	State	₹ Złp	City	State	Zip	
North Kingstown	RI	02852				
Secretary Name		• •	Treasurer Name			
David S. Keach			Erin K. Keach			
Street Address	•		Street Address			
37 Coriander Lan	e		37 Coriander Lane	•		
City	State	Zip	City	State	Zip	
North Kingstown	RI	02852	North Kingstown	RI	02852	
				i.		
Director Name	SES OF THE DIK	FCLORZ (-x - BOX ŁÓŁ	ATTACHMENT) FILL IN SPACES Director Name	BEFORE USING ATT	ACHMENIS	
Erin K. Keach						
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37 Coriander Lan	e					
City	State	Zip	City	State	Zip	
North Kingstown	RI	02852				
Director Name	• • • • • • •	•	Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
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This report must be sign	ed in ink by elt	her the President, V	ice President, Secretary, Assist	- ant Secretary, Treas	 surer, Receiver or Trustee	
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		•	Under penalty of perj	ury, I declare and affir	m that I have examined	
					hedules and statements, and	
2 0 -	1		that all statements co			

Erin K. Keach
Print or Type Name of Officer

President

Title of Officer

City

North Kingstown