

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown. Secretary of State

Corporations Division 100 North Math Street Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _______2005

Filing Period: January 1 - N (FORM MUST BE TYPED OR PRI		ng Fee: \$50.00			<u> </u>
1. Corporate ID No.	2. Name of Corporatio	n		_	
14312	Bolton Corpora	ation			
3. Street Address Principal Business	Office		City	State	Zip
25 PINE HILL 4. Business Phone No.	ROAD		JOHNSTON	R. I	02919
4. Business Priore 50 401 - 647 - 00	12	5. State of Incorporation			6. SIC Code
7 Unief Description of the Character		RHODE ISLAND			18
REMODELING AND CO	NSTRUCTION OF HO	<i>Roode Island</i> IMES			
rresucht Name			CHMENT)	ACES BEFORE USING	ATTACHMENTS
Street Address	· BOLTO	<u>~</u>	Street Address	· BOLTON	
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City	State	Zib	: City	Sun EDNS	1.00
Johns Ton	RI	02919	Street Address 25 PINE City TOHNSTON Treasurer Name	RI	0 29.1-9
WAYNE A.	BOLTO	~			
Street Address		· · · · · · · · · · · · · · · · · · ·	WAYNE A	BOLIVA	·
25 PINE 1	4.LL ROA	D	25 PINE	HUL PAR	ላ
JOHNSTON	State	Zip	25 PINE City JOHNSTON	State	Zio
JOHNSTON	R ±	01919	JOHNSTON	R. Is.	02915
9. NAMES AND ADDRESSES	OF THE DIRECTOR	RS: ("X" BOX FOR ATT	TACHMENT) FILL IN S	PACES BEFORE USIN	G ATTACHMENTS
Director Name	Balta		Director Name		
Director Name WAYNE A. Street Address	730 E 100	_	5		
25 PINE A	LIEC PA	a እ	Street Address		
JOHNSTON	State	Zip	City	Contra	
JOHNSTON	R. I.	02919	:	State	Zip
Director Name	4		Director Name		
			:		•
Street Address			Street Address		·
City	i e		<u> </u>		
·u's	State	Zip -	Cliy	State	Zip
10. SHARES AUTHORIZED (AUTHORIZED SHARES	 ("X" BOX FOR ATT/	 ACHMENT)	11. SHARES ISSUED ("X" ISSUED SHARES	 " BOX FOR ATTACHN	 1ENT) []
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COMM NO PAR VALUE			100	COMMON	NO PAR
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	_		<u></u>		
This report must be si	gned in ink by eithe	er the President, Vice Pr	esident, Secretary, Assistant S	Secretary, Treasurer, R	eceiver or Trustee
					t I have examined this report
10	7-05		including any accompan contained berein are true	ying schedules and stater	ments, and that all statements
File Date	7-05 1046		Wane 3	ollo	1-26-05
Check No	10 Y C		Signature of Officer		Date
	3		WAYNE	BOLTON	
ву:	الد		Print or Type Name of Off	icer	
FOR SECRETABLE OF STA	TE LICE ONLY		Resider	VT	
FOR SECRETARY OF STATE	E USE UNLY		Title of Officer	·	



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

401.222.3040

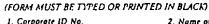
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _______ 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2. Name of Corporation **Bolton Corporation** JOHNSTON 3. Street Address Principal Business Office 02919 6. SIC Code 5. State of Incorporation 401-647-0012 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island REMODELING AND CONSTRUCTION OF HOMES President Name Vice President Name WAYNE WAYNE BO LTON Street Address Street Address WATNE WAYNE Sireei Address Sinvel Address 02919 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name WAYNE Street Address Street Address State Director Name Sirvei Address Street Address State 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Par Value Number of Shares Number of Shares Class/Series Par Value Class/Series 100 COMM NO PAR VALUE 100 NO PAR COMMO~ 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. 3.8.04 File Date FOR SECRETARY OF STATE USE ONLY

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT-CORPORATION ANNUAL REPORT FOR THE YEAR 2003

iling Period:	January	1-March	1	•	Filing	Fec:	\$50.00	
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2. Name of Corporation

14312

3. Street Address Principal Business Office

Bolton Corporation

HILL ROAD PINE 25

4. Rusiness Phone No. 401-647-0012 S. State of Incorporation

BOLTON

02919

6. SIC Code

18

RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island

REMODELING

X

CONSTRUCTION

HOMES

WAYNE

JOHNSTON

Vice President Name

Street Address

25

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

WAYNE BO LTON Street Address

JOHNSTON

HILL ROAD

Secretary Name

WAYNE BOLTON

Street Address

HILL ROAD

02919

Treasurer Name

BO LTO~ WAYNE

PINE HILL ROAD

Street Address

HILL ROAD

A.

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name

A. BOLTON WAYNEStreet Address

HILL ROAD

02919

Street Address

City

State

Zip

Director Name Director Name

Street Address

City

State

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

City

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

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ESSUEE) SHARES

Street Address

Number of Shares

Class/Series

100 COMM NO PAR VALUE

100

COMMOR



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.

 \mathbf{W} AYN $\boldsymbol{\varepsilon}$ Print or Type Name of Officer

PRESIDENT

Form 630 12/02

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



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HILL KON	State of Incorporation	704/03/01-	人工	01919
1012	RHODE ISLAND			6. SIC Code 18
8 CONSTR	UCTION OF	HOMES		
		HMENT) FILL IN SPACES BE Vice President Name	FORE USING ATTACHM	IENTS
		Street Address	•	
HILL RO	90	25 PINE	HILL RO	40
State	Zip	City	State	Zio
RI	02919	TOHNSTON	e I	02919
		Treasurer Name	•	•
BOLTON	•	WAYNE	A BOLTON	
		Street Address		
ILL ROAD		25 PINE	HILL ROAL	5
State	Zip	City	State	Zip
R I	02919	JOHNSTON	RI.	02919
ES OF THE DIRECT	ORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES I		
.		Director Name		
BOLTON	•			
		Street Address		
HILL Rox	9 0			
State	Zip	City	State	Zip
RI	02919			
		Meeter Name		
		Director famile		
		Street Address		
State	Zip		State	Zip
State ("X" BOX FOR ATTACH!		Street Address		Zip
		Street Address City		Zip
		Street Address City 11. SHARES ISSUED (*x*		Zip Far Value
	Office HILL ROAD OF Business Conducted in Rhi & CONSTR ES OF THE OFFICE HILL ROAD State RI BOLTON State RI ES OF THE DIRECT BOLTON	2. Name of Corporation Bolton Corporation Office HILL ROAD S. State of Incorporation RHODE ISLAND OF Business Conducted in Rhode island **Y CONSTRUCTION OF ES OF THE OFFICERS ("X" BOX FOR ATTACK A. BOLTON HILL ROAD State RI 02919 RI 02919	2. Name of Carporation Bolton Corporation Mice City HILL ROAD S. State of Incorporation RHODE ISLAND Of Business Conducted in Rhode island 8 CONSTRUCTION OF HOMES ES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BE Vice President Name WAYNE A Street Address FILL ROAD State Zip RI O2919 City Teasurer Name WAYNE Street Address LLL ROAD State Zip City Teasurer Name WAYNE Street Address To HNSTON The Street Address Street Address To HNSTON Street Address ES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES IN Director Name BOLTON Street Address Director Name	2. Name of Corporation Bolton Corporation Wiffice City State JOHNSTON RI S. State of Incorporation RHODE ISLAND For Houses Conducted in Rhode Island 8. Construction OF Houses ES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT) FILL ROAD State RI OLTON State A. BOLTON State A. BOLTON State PILL ROAD State A. BOLTON A. BOLTON State A. BOLTON State A. BOLTON State A. BOLTON A. BOLTON State A. BOLTON State A. BOLTON State A. BOLTON A. BOLTON B. BOLTON A. BOLTON A. BOLTON B. BOLTON B. BOLTON A. BOLTON B. BOLTON B. BOLTON A. BOLTON B. BOLTON

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 spatements contained herein are true and correct.

that all spatements contained herei	n are true and correct.
Wayne Bolton	1-30-02
Signature of Officer	Date

enature of fifficer

WAYNE BOLTON

or Type Name of Officer

PRESIDENT
This of Officer

5 5

Form 630 12/01

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

I.	Corporate	ID	N	0				
			١.	e	7	4	2	

2. Name of Corporation

Bolton Corporation

3.	Street	Ad	diess	Princ	ipai	Hus	iness	Off	ice	•
		า	_	1			,	1.	1	,

4. Business Phone No. 401-647-0012 RHODE ISLAND

02919

6. SIC Code 18

7. Brief Description of the Character of Business Conducted in Rhode Island

REMODELING

8

BOLTON

CONSTRUCTION HOMES

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name

WAYNE Street Address

PINE HILL ROAD

WAYNE

A. BOLTON

Street Address HILL ROAD

02919

WAYNE

HILL ROAD

A. BULTON

JOHNSTON

02919

Treasurer Name

WAYNE Street Address

HILL

9. NAMES AND ADDRESSÉS OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

WAYNE Street Address

BOLTON

Street Address

City

State

7.1p

Director Name

Street Address

Street Address

City

State

City

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

100

100 SHS COM NO PAR VAL

COMMON

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.

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



FOR SECRETARY OF STATE USE ONLY

WAYNE

Form 630 12/00

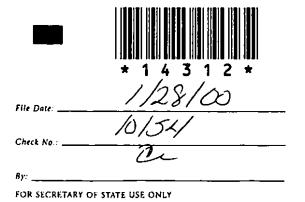
James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

vidence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January	1-March 1 • F	iling Fee: \$50.00		2.000	- PLEASERI INSTRUCTI
FORM MUST BE TYPED IN BLA	ICK)				
I. Carparate ID No.	2. Name of Corporation	•			
14312 3. Street Address Principal Business	Bolton Corp	oration	City	State	Zip
25 PINE 1. Business Phone No.	HILL ROAD	5. State of Incorporation	JOHNSTON	R I	02919 6. SIC Code
647-0012 T. Brief Description of the Characte	r of Business Conducted in R	RHODE ISLAND			18
REMODELING B. NAMES AND ADDRES President Name				BEFORE USING ATTACH	MENTS
WAYNE F itreet Address 15 PINE	HI BOLTON	•	Street Address	SAME	
JOHNSTON .	State R I	21p 02919	City	State	Zip
ecretary Name	•		Treasurer Name		
ireet Address 5	AME		Street Address	SAME	
Olty	State	Zip	City	State	Zip
D. NAMES AND ADDRES Olitector Name WAYNE A		TORS (*X* BOX FOR ATTA	Director Name	ES BEFORE USING ATTAC	CHMENTS
ireer Addiess 25 PINE	HILL ROAL)	Street Address		
JOHNSTON	State P T	^{21p} 02919	City	State	Zip
Director Name	, -	<i>5211 1</i>	Director Name		
treet Address			Street Address		
Siry	State	Zip	City	State	Zip
IO. SHARES AUTHORIZE	D ("X" BOX FOR ATTACE	HMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)	
Sumber of Shares	Class/Series	Far Value	Number of Shares	Class/Series	Par Volue
100 SHS COM NO P	AR VAL		100	COMMON	NO PAR

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.

1/2 R.OT. 1-36

Signature of officer Date

Print or Type Name of Officer

PRESIDENT
Thile of Officer

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Corporate ID No. 14312	2. Name of Carporate Bolton Corp				
Street Address Principal Business			City	State	Zip
•	• •		JOHNSTON	RI	07919
Business Phone No.	<u> </u>	5. State of Incorporation	<u></u>		6. SIC Code
647-0012		RHODE ISLA	ND		18
Brief Description of the Characte	er of Business Conducted is	n Rhode Island	- 1 44-5		
REMODELING	8 Cons	TRUCTION 0	F HONGS		
	SSES OF THE OFFI	CERS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES	BEFORE USING ATTACH	MENIS
resident Name	0 - 1 Tak	-	Vice President Name		
WAYNE A.	BOLLO	· · · · · · · · · · · · · · · · · · ·	Street Address	-SAME	
ieel Maaress 25 PINE L	LILL ROAD	1			
25 PINE A TOHNSTON	State	Zip	City	State	Zip
TOHNSTON	RI	02919			
cretary Name			Treasurer Name		
			·	-SAME-	
reet Address SAN	46		Street Address	3 n . C	
			·		
ity	State	Zip	City	State	Zip
irector Name WAYNE A reet Address	•		Director Name Street Address		·
JOHNSTON	HILL KON	<u> </u>	City	State	Zip
TO HASTON	State	02-919	Cay	}	\ _r
Virector Name			. Director Name		
treet Address			. Street Address		
					710
Itty	State	Zip	City	State	Zip
A CILIDRO LIMITARIO	SD (ave now one)	· cup reversity	11 SHABES ISSUED	*X* BOX FOR ATTACHMENT)	
O. SHARES AUTHORIZ	FD ("X" BOX FOR ATT	ACHMEN I) [_]	II. SHARES ISSUED (A BUN FUR ALL MURRENT	
	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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· · · ·	PAR VAL		100	COMMOR	NO PAR
Number of Shares 100 SHS COM NO F	PAR VAL		100	COMMOR	NO PAR

	1 1		•		
*	1 4 3 1 2 *	Under penalty of pe	rjury, I declare and affir	m that I have examined	
	•			hedules and statements, and	1
1 /	1. 1100	that all statements of	contained herein are tru	e and correct.	
ile Date:	yax 1199	Warman a	Bolton	2-26-99	
C	(1169	Signature of Officer		Date	-
Check No.:	219(0)	WAYNE	BOLTON		_
		Print or Type Name of O	fficer	<u> </u>	-
y:					_

james R. Lungevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

iling Period	: January	1-March 1	•	Filing	Fee:	\$50.00
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(FORM MUST BE TYPED IN BLACK)

1. Carporate ID No. 14312

2. Name of Corporation

Bolton Corporation

a. attee Audress Frincipus Business Of	luce.		City	State	Z1p
25 PINE HIL	L ROAD		JOHNSTON	R. I	02919
1. Business Phone No.		5. State of Incorporation	_		6. SIC Code
647-0012		RHODE ISLAND)		0018
7. Brief Description of the Character o	_	ode Island			40.10
REMODELING	8 60113	TRUCTION 0	F HOMES		
8. NAMES AND ADDRESSI	S OF THE OFFICE	RS ("X" BOX FOR ATTACH	iment)		
President Name			Vice President Name		
WAYNE A			Street Address	SAME	
25 PINE JOHNSTON	HILL ROA	۵			
City	State	Zip	City	State	Zip
	RI	02919			
Secretary Name			Treasurer Name	•	. • •
Street Address	SAME		Street Address	SAME	
City	State	Zip	City	State	Zip
D NIABATE AND ADDRESS	C OF THE DIRECT	CORE (AVA DOV DOR ATTA	Gran (Carm)		
9. NAMES AND ADDRESSI Director Name	S OF THE DIRECT	ORS CAT BUX FUR ATTA	CHMEN I / Director Name		
WAYNE A.	BOLTON	,	Director /veinc		
Street Address	002.		Street Address		
25 PINE HILL	ROAD				
25 PINE HILL STOHNSTER	State	ŻIp	City	State	Zip
JOHN STEW	RI	21p 02419			
Director Name			Director Name		
treet Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED	(*X* BOX FOR ATTACH	MENT)	11. SHARES ISSUED (*)	(* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 SHS COM NO PAR	VAL		100	Common	NO PAR

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

	* 1 4 3 1 2 *
Flie Date:	2/198
Check No.:	3893
Ву:	Cox 410
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.



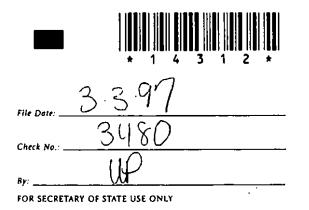
James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

iling Period: Janua	ry 1-March 1	•	Filing Fee:	\$50.00
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(FORM MUST BE TYPED IN BL	JCK)				1815 10
I. Corporate ID No.	2. Name of Corporation				
14312	Bolton Corpo	ration			
3. Street Address Principal Busine	ss Office		City	State	Zip
25 PINE	HILL ROAD		JOHNSTON	L I	02919
4. Business Phone No.		5. State of Incorporation			6. SIC Code
647-0012	-	RHODE ISLAN	ID		0018
7. Brief Description of the Charac					
CONSTRUCTIO	~ OF Home	Y OFFICE	BULLISINGS	AND REPAIRS O	N SAME
8. NAMES AND ADDRE	SSES OF THE OFFICE	ERS ("X" BOX FOR ATTAC	CHMENT) Vice President Name		
WAYNE	BOLTON		WAYNE	BOLTON	
Street Address			Street Address	.50	
25 PINE	HILL ROAD			AME	•
Cily Chus Ton	State	Zip	City	State	Zip
JOHNS TON	RI	02919			
Secretary Name			Treasurer Name		
WAYNE BO	LTO~	•	WAYNE	BO LTON	
Street Address			Street Address		
SAME	=		5,4	ME	
City	State	Zip	City	State	Zip
9. NAMES AND ADDRE Director Name WAYNG B Street Address 25 PINE HILL City TO HASTON Director Name Street Address	o Lro~	TORS ("X" BOX FOR AT Zip OJGIG	TACHMENT) Director Name Street Address City Director Name Street Address	State State	Zip Zip
City	State	ZIP	City	?tate	2.19
10. SHARES AUTHORIZ AUTHORIZED SHARES			ISSUED SHARES	Class Market	Par Value
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	rar value
100 SHS COM NO	PAR VAL		100	Commo.~	NO PAR

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.

Dollar 2/14/97*

	- Dollar	2119191	
Signature of Officer		Date	
WAYNE	BOLTON_	<u> </u>	
Print or Type Name of Office	ır		

Title of Officer

PROFIL CORPORATION **ANNUAL REPORT**

For Secretary of State Use Only

Ву:

1996



James R. Langevin, Secretary of State Corporations Division

100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

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

CORPORATE ID HD.	, 2. NAME OF CORPORATION	PLEASE TYPE OR	PRINT IN BLACK INK.		
14312	Bolto	n Corporation		•	
STRÉET ADORÉSS PRINCIPAL BUSINESS			OTTY	STATE	Z₽ C00€
25 PINE	F HILL RI		JOHN 570~	RI	02919
647 -00		S. STATE OF INCOMPORATION RHODE IS	GLAND		6. SC CODE
TEF DESCRIPTION OF THE CHARACTER			a i Unest C	· ·	
REMODELI	4 C	0,2 5 T RUCTION	oF Homes		
SIDENT NAME			ESSES OF THE OF	FICERS -	· · · -
WAYNE A	a. BOLT	-0.~	WAYNE A	BOLTON	
ETADORESS 25 PINE	HILL ROA	10	STREET ADDRESS 25 PINE	HILL RO	ዶ ቃ
25 PINE JOHNSTIN	STATE R.I.	2P COOR 02919	TO HIN STON	STATE	02919
ETARY HAVE		; /	TREASURER NAME	1,7,4	02/17
ET ADDRESS	SAME_			SAME	
E AUDRESS			STREET ADDRESS -	•	
,	STATE	ZIP COOE	CITY	STATE	ZIP COOE
	- 4				
CTOR NAME		MES AND AUDI	DIRECTOR NAME	RECTORS	
ET ADORESS		 	STREET ADDRESS		
	STATE	70000	l Garry	1 0117	
	SINIE	ZIP C00%	1	STATE	2P COOE
CTOR NAME			DIRECTOR NAME		
LET ADORESS		 	STREET ADORESS		
	STATE	ZIP CODE	any	SIATE	ZP CODE
		HARES AUTHOR	11 TED AND LEGUED		-
	AUTHORIZED SHARES	HARES AVINOR	IZED AND ISSUED	:	
NUMBER OF SHARES	CLASS / SERIES	PAR YALUE	HAUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100 SHS CO	M NO PAR VAL		100	Cont	NO PAR
					<u> </u>
	71			<u> </u>	
Pre	וחו esident. Vice Presic	is report must be SIC lent. Secretary. Assis	GNED IN INK by either the stant Secretary, Treasurer,	e Receiver or Truste	e 1888
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		
			report, including a	any accompanying sch	affirm that I have examined affirm that I have examined and statements, and statements.
	;	•	all statements co	ntained herein are true	and correct.
File Date: 2/1	14/96	•	Signature of Office	e Doltin	<u>, </u>
			anghature grund	- D	
Check No:	1 -	•	<i>W_{A} Y_N b</i> Print or Type Nam	ne of Officer	
File Date: 2/1	14/96	•	7/	e Boltin BOLTON	and correct.

State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

UC# 2430 BY

ANNUAL REPORT

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ALL ENTRIES MUST BE COMPLETED IN	N FULL OR THE	FORM WI	ILL BE RE			
Corporate ID:		Annual Rer	port for the v	1995 vear:		
Bolton Cor	poration		, , , , , , , , , , , , , , , , , , , ,	,		
Name of Corporation:						
Business entity organized under the laws of the State of:	_K		ss Entity is (cl	· ·		
For foreign entity, address and telephone number of princip	nal office:			oration (See RIGL Chapter 7		
		[] Pr	ofessional Se	rvice Corporation (See RIG	L Chapter 7-5	.1)
		Reinf ct	atement of the	e character of business cond	natad in Dhaw	la Tula- d.
Phone: (401) 647 -0012		REM	10DE LING	& CONSTRUCT	neried in Knod	ie istand:
Address and telephone of the principal office of business en	ntity in Rhode		6.4ES			
Island (Provide street address - Not P.O. Box):						
25 PING HILL RIAD						
JOHNSTON, RI						
Phone: (961) (47-0012					· · · · · · · · · · · · · · · · · · ·	
	· 					
T	HE NAMES OF T	HE OFFICE	ERS ARE:			
•				CITY/STATE		ZIP CODE
WAYNE A BOLTON	25P ₁	DRESS	<u> </u>	JOHN STON	R I	02919
,	57622176	NDK1213		CHASIME		ZIP CODE
SECRETARY	STREET AL	DDRESS		CITY/STATE		ZIP CODE
)			\		
TREASURER	STREET AL	DORESS	-	CITY/STATE:		ZJP CODE
NAME T	IE NAMES OF THE	HE DIRECT	<u>ORS ARE:</u>			
_	_				a	ZIP CODE
NAME A BOLTON	25 PINE STREET AL	HILL	RD	CITY/STATE	RI	ZIPCODE
						Ell CODE
NAME	STREET AD	ORESS		CHYSTATE		ZIP CODE
NUMBER OF SHARES AUTHORIZED (Rider may be attached)	ed)	NUMBER O	F SHARES IS	SUED AND OUTSTANDING	(Rider may be	attached)
Number of Shares 100 Class / Series Colle	10~	Number of	Shares	Class / Series		
,		100		Commor		
		'		C • • • • • • • • • • • • • • • • • • •		
	-	·				
Date	By:	Warns	· Bot	Itan Pres		
			h.	IAYNE BOLTO	<u>~~</u>	
Form 21 - 105		YPE NAME OF OFF	TCER SIGNING	ORESIDENT	 -	
Form 3: 1/95	TITLE OF Q	FFICER SIGNING				

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:
PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

WAYME A. BOLTON 25 PINE HILL ROAD JOHNSTON RI 02819 PAID JANAA 1975

porate ID:0014512	д	nnual Report for the y	éar:	1994	
ne of Business Entity:		Eplton Cor			
ness entity organized under the laws of the State of	7 .	Business Entity is (ch	eck one)	·	
rai Taxpaver Identification Number		• •	Corporation (See RIGL		
oreign entity, address and telephone number of principal offic			nal Service Corporation Jability Company (See I		pter 7-5.1)
oreign control of periodical and the periodical control of periodi			ng address of contact per		
		communications may			
			A BOLTON		· ·
ne ()			RI 0:		
ress and telephone of the principal office of business entity in	Rhode		, 13 <u>L</u> 0 1	-1.1	
id (Provide street address - Not P.O. Box).	Killace	Brief statement of the	character of business co	onducted in Rho	de Island:
25 PINE HILL ROAD			16 8 COA		
JOHNSTON, R. J 02919		OR HOME			
		Date of Organization	8/10/88		
te (647) 0012		Date of Qualification	to do business in Rhode	Island (if foreig	gn entity):
	:				
THE N	AMES OF THE	E OFFICERS ARE:	ัดที่จังระส <i>ท</i> ี่ =====		= Zerose
WAYNE A. BULTOR			JOHNSTO	on RI	02919 ZIPCODE
H.D. OFFRATING OFFICER OR. TO VICE PRESIDENT A. R.A. OW:	STREET ADOR	555	CONVICATE		AND CODE
USTODIAN OF RECORDS OR . T. SECRETARY (Child On-	STREET ADDR	LSS	CITYISTATE		SIE COD#
HTELENANCIAL CEPTCES OR TREASURER (Check One)	STREET ACOR	FSS	CITY STATE		ŽIP CCD€.
7777	A VEC OF THE	DIRECTORS ARE			
	AMES OF THE	DIRECTORS ARE:	CITYMIATE		ZP2CODE
WAYNE A BOLTON	25 PINE STREET ADDR	HILL ROAD	JOHNSTON,	RI C	77919 ZIPLODE
<u>.</u>					
•	STRIFT ADDR	FSS	CITY STATE		ZIRCODE
MBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES	ISSUED AND OUTST	ANDING (If A	nnlicable)
MBER /00		NUMBER 700			
ASS COMMON		CLASS COMMO	pr.		
RIES] ;	SERIES			
OVALUE OF		DAD MALLETAD			
R VALUE OR THOUT PAR		PAR VALUE OR WITHOUT PAR	PAR		
	.	- / 1		•	
<u>2-27</u> 19 94	Hv:	Vaino A.	Bolton		
	\				
	PENTORTYP	ENAME OF DETICER SIGNING	LTON		
	PRE	SIDENT			
	Tu. Or Ores	S CR SEATING			
en 194	. An	Apply to the second second second second			
DESIGNATED REGISTERES					
EASE NOTE: If the Corporation has changed its registered	ortice and/or regis	FILED	onn zor Politi EEC 3 M	use of fried.	
		1 1994			
		MAH			
WAYNE A. BOLTON		MAH 1 1994 BY 6C 2086			

WAYNE A. BOLTON BYLL 25 PINE HILL ROAD JOHNSTON RI 02919



AMENDED

To be filed annually between January 1st and March 1st

State of Rhode Island and Brovidence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID /43/2			ear
FIRST: The name of the corporat	ion is $Bolton$	· CORPORATIO	~
SECOND: It is incorporated under			
THIRD: Character of business, bri		ISTRUCTION,	
FOURTH: If foreign corporation, a	address of its principal	office	
FIFTH: Business address in Rhode		PINE HILL K	
	JOHA	ISTON, R.I	07919
SIXTH: Names and addresses of it	s directors and officers	Address (including numbe	(Attach rider if necessary)
	Director		***************************************
	Director		
	Director		
WAYNE BOLTON	President 25	FINE HILL K	POAD, JOHNSTON, RI
SAME	Vice President		
SAME			
SAME	Treasurer		
SEVENTH: Number of Shares auth	iorized:		Par Value or statement that
No of Shares 100 Class	COMMON	FIRM WAY 1 9 1993	chares are without par value WO PAR
EIGHTH: Number of Shares issued	i: Rec'd &	. 97.13	Par Value or statement that
No. of Shares Class		Senes And Charles	shares are without par value
Dated 5-19 19	(Name of C	TON CORPORA OPPORATION) Varne Boll	770 N
(Report must be signed by an offic		President	

State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

1699 mmc)

Corporate ID 09	14312	Annual Report for the year 1993			
FIRST: The name of	f the corporation is	Bolton Corporation			
	_	RHODE ISLAND			
THIRD: Character of	of business, briefly stated, is.	BUILDING REPAIRS A	1 ~ b		
CONSTRUCTION	OF HOMES				
FOURTH: If foreign	corporation, address of its p	orincipal office			
FIFTH: Business add	dress in Rhode Island/	Y HOPKINS AUE	JUHASTON RI		
SIXTH: Names and	addresses of its directors an	d officers: Address (including numb	(Attach rider if necessary)		
WAYNE A. G	Director	MY HOPKINS AVE, J	0HNSTO~ RI 0291		
WAYNE A. Bo		<i>SAME AS A3</i> 00€ lent			
WAYNE A. BO	-	SAME AS ABOUT			
SEVENTH: Number No. of Shares	of Shares authorized: Class	Series	Par Value or statement that shares are without par value		
EIGHTH: Number of	f Shares issued:	Series	Par Value or statement that shares are without par value		
100	Commor		NIP		
		BOLTON CORPORATION (Name of Corporation) By Name of Bolt Title PRESIDENT	_		
(Keport must be s	igned by an officer)	Time / 50010501			

State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 002.40	<u> 12</u>	Annual Report for the	year 1992
FIRST: The name of the corp	poration is		Lian
SECOND: It is incorporated to	under the laws of	R. I.	
THIRD: Character of busines	s, briefly stated, is	DUSTRUCTION AND	Building
OF HOMES	-		
FOURTH: If foreign corporat			
FIFTH: Business address in R	Shode Island 114	HOPKINS AVE., JO	H~STO~, RI 02919
SIXTH: Names and addresses	s of its directors and office	Cers: Address (including nur	(Attach rider if necessary)
WAYNE A BOLTO	Director	114 HOPKINS AVE.,	JOHNSTON, RI 02919
	Director		
	Director		
WAYNE A BOLTON	President	114 HOPKINS AVE	JOHNSTON RJ 02919
		······	
	Secretary		
	·		
SEVENTH: Number of Shares	authorized:	71#29 74232 AID Series	Par Value
	M	MI# 4423C	or statement that shares are without
No of Shares 100	Class D	Series	par value
	-57	B 4 teen	WO THIC
EIGHTH: Number of Shares i	eaneq.	TATE	Par Value
	SEC"	Y OF STATE	or statement that shares are without
No. of Shares	Class	Series	par value
700			NO PAR
Dated 2-03	1992	BOLTON CORPORA	774.4
Daicd	(Name	of Corporation)	/./
	Ву	Wayne Bolto	~
(Report must be signed by ar	n officer) Title	President	

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	14312	Annual Report for th	ne year
FIRST: The name of t	he corporation is	Bolton Corporat	ion
SECOND: It is incorpo	orated under the laws of	RHODE ISLAND	•••••••••••••••••••••••••••••••••••••••
THIRD: Character of	business, briefly stated, is	CONSTRUCTION	8 REMODELING
OF HOMES AND	ANY OTHER LE	GAL PURPESE	
FOURTH: If foreign co	orporation, address of its prin	ncipal office	······································
FIFTH: Business addre	ess in Rhode Island // Y	HOPKINS AVENUE	
	J 0 H	INSTON, R. I. 02	919
SIXTH: Names and ad	ldresses of its directors and o		(Attach rider if necessary) number, street, zip code)
WAYNE A. BO	LTON Director	114 HOPKINS AVER	UE, JOHNSTON, R. I. UZGA
		•••••••••••••••••••••••••••••••••••••••	
	Director		
	President		
	Vice Presiden	ıt	
	Secretary		
	Treasurer		
SEVENTH: Number of	Shares authorized:	Series	Par Value or statement that shares are without par value
100	SEE NO PAR	DAID	,
EIGHTH: Number of S	Shares issued:	PAID FEB 20 1991 SEBUY OF STATE	- Par Value or statement that shares are without
No. of Shares	Class	3E333 O	par value
Dated		BOLTON CORPOR	4710N
Ω	Ву	, Nayne Bold	m
(Report must be sign	ned by an officer) Ti	ile President	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0014	1312	Annual Report for the ye	ar 1990
FIRST: The name of t	he corporation is	Eolton Corsoration	
SECOND: It is incorpo	orated under the laws of	R. I	
THIRD: Character of I	business, briefly stated, is	CONSTRUCTION	
FOURTH: If foreign co	orporation, address of its p	rincipal office	
	ess in Rhode Island	14 HOPKINS AVE.	
	dresses of its directors and	•	(Attach rider if necessary)
WAYNE A BOL	Director	HOPKINS AUE.	JOHNSTON, R. I.
	Director		
	Director		······
WAYNE A. BOLT	President	SAME AS AB	00 E
	Vice Presid	ent	
	C		
LAYNE A BOL	•	SAME AS ABO	
	Shares authorized:		Par Value
No. of Shares	Class	Series PAID	or statement that shares are without par value
		MAR ON M.	,
		SECTY, OF STATE	
EIGHTH: Number of S	Shares issued:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
Dated 2/26		BOLTON CORPORI (Name of Corporation) By Nayre A. Bolton	4710~
(Report must be sign		Title PRESIDENT	

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	.4312	Annual R	Report for the year	1989
FIRST: The name of	of the corporation is			
SECOND: It is inco	rporated under the laws	of RHODE I	SLAND	
THIRD: Character	of business, briefly stated	i, is CONSTRUC	T10~ & C	ARPENTRY
WORK				•
FOURTH: If foreign	corporation, address of	its principal office	NIA	
FIFTH: Business ad	dress in Rhode Island	114 HOPKIN	s AVENUE	-
		JOHNSTON, A	?. I. 02919	•••••
SIXTH: Names and	addresses of its directors	_	(z dress (including number, street,	Attach rider if necessary) zip code)
	Directo	or	••••••••••••	••••••
	Directo	or	***************************************	
	Directo	or		
WAYNE BOL	- To ~ Preside	nt //Y Hop	KINS AVEN	, U &
SAME	Vice Pr	フゥルンSToノ esident	-, R. 7. 029	1'9
_	Secreta			••••••
SAME	Treasur	•		•••••••••••••••••••••••••••••••••••••••
SEVENTH: Number	of Shares authorized:			
No. of Shares	Class	Series		Par Value r statement that ares are without par value
			_	NO PAR
EIGHTH: Number of	f Shares issued:	© :	_	
No. of Shares		<u>ن</u>	EC'Y OF STATE of shi	r statement that ares are without
100	Class	Series		par value
700			N	PAR
Dated 2 / 2 6	19 <i>89</i>	(Name of Corporation)	CORPORATION	•
		By Wayne les	lton	
(Report must be si	gned by an officer)	Title PRESIDEN		