



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

**Annual Report for the ye
 Corporation**

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

2019

RECEIVED
 STATE
 SECRETARY OF STATE
 CORPORATIONS DIV.
 2019 FEB - 8 AM 10:26

1. Entity ID Number 111838		2. Exact name of the Corporation Kirby Bros. of Warwick construction, Inc.			
3. Principal Office Address 132 Shamrock Drive			City Warwick	State RI	Zip 02886
4. NAICS Code 238990		6. Brief description of the character of business conducted in Rhode Island Sewer and septic system installation. Excavation. Contracting			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name John T Kirby			Vice-President Name Elizabeth G. Anderson		
Street Address 132 Shamrock Drive			Street Address 132 Shamrock Drive		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name Elizabeth G. Anderson			Treasurer Name John T. Kirby		
Street Address 132 Shamrock Drive			Street Address 132 Shamrock Drive		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name no dDirectors			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		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		100		Common	
				PAR VALUE	
				No Par Value	
11. 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.					
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.					
Name of Authorized Representative John T. Kirby				Date 01/10/2019	
Signature of Authorized Representative <i>John T Kirby</i>				Date 10:26 FEB 08 2019	



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

February 08, 2019 10:26 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

