



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

Annual Report for the year: 2017
Corporation

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

RECEIVED
 SECRETARY OF STATE
 CORPORATION DIV
 2019 FEB 27 2:00 PM
 02494
 : 57

1. Entity ID Number 321139		2. Exact name of the Corporation Bowdoin Construction Corp.				
3. Principal Office Address 220-1 Reservoir Street			City Needham Heights	State MA		
4. NAICS Code 236220		6. Brief description of the character of business conducted in Rhode Island Construction Management				
5. State of Incorporation MA						
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>						
President Name Irwin M. Yanowitz			Vice-President Name NONE			
Street Address Two Saint Paul Street, Unit #106			Street Address			
City Brookline	State MA	Zip 02446	City	State	Zip	
Secretary Name Irwin M. Yanowitz			Treasurer Name Irwin M. Yanowitz			
Street Address Two Saint Paul Street Unit #106			Street Address Two Saint Paul Street Unit #106			
City Brookline	State MA	Zip 02446	City Brookline	State MA	Zip 02446	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>						
Director Name Christopher T. Keeley			Director Name Brian T. Collins			
Street Address 14 James Avenue			Street Address 1361 East Street			
City Needham	State MA	Zip 02494	City Mansfield	State MA	Zip 02048	
Director Name Andrew J. Buckman			Director Name Brendan M. Wall			
Street Address 2 Castle Drive			Street Address 291 Washington St.			
City Sharon	State MA	Zip 02067	City Duxbury	State MA	Zip 02332	
9. Shares Authorized 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.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>				
		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE
		100	Common		No Par	
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 <i>Brendan M. Wall</i>					Date 2/27/19	
Signature of Authorized Representative <i>[Signature]</i>						

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FEB 27 2019
 BY *[Signature]* SPSPF
 2:00