



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>32931</b>		2. Name of Corporation <b>MARSH BUILDERS, INC.</b>			
3. Street Address Principal Business Office <b>130 Burnt Swamp Road</b>			City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
4. Business Phone No. <b>(401) 333-5712</b>		5. State of Incorporation <b>RHODE ISLAND</b>		6. SIC Code <b>34</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>GENERAL CONSTRUCTION</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Peter Marsh</b>			Vice President Name <b>Anne Marsh</b>		
Street Address <b>130 Burnt Swamp Road</b>			Street Address <b>130 Burnt Swamp Road</b>		
City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>	City <b>cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
Secretary Name <b>Anne Marsh</b>			Treasurer Name <b>Peter Marsh</b>		
Street Address <b>130 Burnt Swamp Road</b>			Street Address <b>130 Burnt Swamp road</b>		
City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>NONE</b>			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
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>100 NO PAR VALUE</b>			<b>100</b>	<b>COMMOM</b>	<b>No Par</b>

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



**FILED**

File Date MAR 21 2005  
Check No. \_\_\_\_\_  
By \_\_\_\_\_

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.

*Peter Marsh*  
Signature of Officer

2-18-05  
Date

**Peter Marsh**

Print or Type Name of Officer

**President**

Title of Officer



Office of the Secretary of State  
Matthew A. Brown, Secretary of State

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 BLACK)

1. Corporate ID No. 32931		2. Name of Corporation MARSH BUILDERS, INC.			
3. Street Address Principal Business Office 130 Burnt Swamp Road			City Cumberland	State RI	Zip 02864
4. Business Phone No. (401) 333-5712		5. State of Incorporation RHODE ISLAND		6. SIC Code 34	
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL CONSTRUCTION					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Peter Marsh			Vice President Name Anne Marsh		
Street Address 130 Burnt Swamp Road			Street Address 130 Burnt Swamp Road		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
Secretary Name Anne Marsh			Treasurer Name Peter Marsh		
Street Address 130 Burnt Swamp Road			Street Address 130 Burnt Swamp Road		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			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
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	NO PAR VALUE		100	Common	No Par

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



\* 3 2 9 3 1 \*

File Date: 2.27.04  
Check No.: 9523  
By: [Signature]

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]  
Signature of Officer  
Peter M. Marsh  
Print or Type Name of Officer  
President  
Title of Officer  
Date: 1-28-04



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**  
Filing Period: January 1-March 31 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **32931**  
2. Name of Corporation **MARSH BUILDERS, INC.**  
3. Street Address Principal Business Office  
**130 Burnt Swamp Road**  
4. Business Phone No. **(401) 333-5712**  
5. State of Incorporation **RHODE ISLAND**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**General Construction**

City **Cumberland** State **RI** Zip **02864**  
6. SIC Code **34**

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

President Name **Peter Marsh**  
Street Address  
**130 Burnt Swamp Road**  
City **Cumberland** State **RI** Zip **02864**

Vice President Name **Anne Marsh**  
Street Address  
**130 Burnt Swamp Road**  
City **Cumberland** State **RI** Zip **02864**

Secretary Name **Anne Marsh**  
Street Address  
**130 Burnt Swamp Road**  
City **Cumberland** State **RI** Zip **02864**

Treasurer Name **Peter Marsh**  
Street Address  
**130 Burnt Swamp Road**  
City **Cumberland** State **RI** Zip **02864**

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

Director Name  
Street Address  
City State Zip  
Director Name  
Street Address  
City State Zip

Director Name  
Street Address  
City State Zip  
Director Name  
Street Address  
City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
100 NO PAR VALUE		

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES	Class/Series	Par Value
100	Common	No Par

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



\* 3 2 9 3 1 \*

File Date: 3-3-03  
Check No.: 9234  
By: [Signature]

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] 2/6/03  
Signature of Officer Date  
Peter M. Marsh  
Print or Type Name of Officer  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **32931** 2. Name of Corporation **MARSH BUILDERS, INC.**  
3. Street Address Principal Business Office **130 Burnt Swamp Road** City **Cumberland** State **RI** Zip **02864**  
4. Business Phone No. **(401) 333-5712** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**

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

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

President Name <b>Peter Marsh</b>	Vice President Name <b>Anne Marsh</b>
Street Address <b>130 Burnt Swamp Road</b>	Street Address <b>130 Burnt Swamp Road</b>
City State Zip <b>Cumberland RI 02864</b>	City State Zip <b>Cumberland RI 02864</b>
Secretary Name <b>Anne Marsh</b>	Treasurer Name <b>Peter Marsh</b>
Street Address <b>130 Burnt Swamp Road</b>	Street Address <b>130 Burnt Swamp Road</b>
City State Zip <b>Cumberland RI 02864</b>	City State Zip <b>Cumberland RI 02864</b>

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

Director Name <b>None</b>	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

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**100 NO PAR VALUE**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**10 Common No Par**

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



\* 3 2 9 3 1 \*

File Date: 02-15-02  
Check No.: 9219  
By: [Signature]

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 Officer: [Signature] Date: 2/13/02  
Print or Type Name of Officer: Peter M. Marsh  
Title of Officer: President



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **32931** 2. Name of Corporation **MARSH BUILDERS, INC.**  
 3. Street Address Principal Business Office **130 Burnt Swamp Road** City **Cumberland** State **RI** Zip **02864**  
 4. Business Phone No. **(401) 333-5712** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**  
 7. Brief Description of the Character of Business Conducted in Rhode Island  
**General Construction**

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

President Name <b>Peter Marsh</b>	Vice President Name <b>Anne Marsh</b>
Street Address <b>130 Burnt Swamp Road</b>	Street Address <b>130 Burnt Swamp Road</b>
City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>
Secretary Name <b>Anne Marsh</b>	Treasurer Name <b>Peter Marsh</b>
Street Address <b>130 Burnt Swamp Road</b>	Street Address <b>130 Burnt Swamp Road</b>
City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>

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

Director Name <b>None</b>	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

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

AUTHORIZED SHARES  

Number of Shares	Class/Series	Par Value
<b>100</b>	<b>NO PAR VALUE</b>	

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  

Number of Shares	Class/Series	Par Value
<b>10</b>	<b>Common</b>	<b>No Par</b>

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



\* 3 2 9 3 1 \*

File Date: 2/26  
8914  
 Check No.: \_\_\_\_\_  
 By: [Signature]

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] Date 2/25/01  
 Signature of Officer

Peter marsh  
 Print or Type Name of Officer

President  
 Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **32931** 2. Name of Corporation **MARSH BUILDERS, INC.**  
3. Street Address Principal Business Office **130 Burnt Swamp Road** City **Cumberland** State **RI** Zip **02864**  
4. Business Phone No. **(401) 333-5712** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**

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

General Construction

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

President Name <b>Peter Marsh</b> Street Address <b>130 Burnt Swamp Road</b> City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	Vice President Name <b>Anne Marsh</b> Street Address <b>130 Burnt Swamp Road</b> City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>
Secretary Name <b>Anne Marsh</b> Street Address <b>130 Burnt Swamp Road</b> City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	Treasurer Name <b>Peter Marsh</b> Street Address <b>130 Burnt Swamp Road</b> City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>

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

Director Name <b>None</b> Street Address  City _____ State _____ Zip _____	Director Name  Street Address  City _____ State _____ Zip _____
Director Name  Street Address  City _____ State _____ Zip _____	Director Name  Street Address  City _____ State _____ Zip _____

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

AUTHORIZED SHARES	Class/Series	Par Value
100 SHS NO PAR VAL		

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
10	Common	No Par

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



\* 3 2 9 3 1 \*

File Date: \_\_\_\_\_  
**FILED**  
Check No.: \_\_\_\_\_  
**MAR 02 2000**  
By: \_\_\_\_\_  
FOR SECRETARY OF STATE

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.

*Peter Marsh*  
Signature of Officer \_\_\_\_\_ Date **1-18-00**  
**Peter Marsh**  
Print or Type Name of Officer \_\_\_\_\_  
**President**  
Title of Officer \_\_\_\_\_



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **32931** 2. Name of Corporation **MARSH BUILDERS, INC.**

3. Street Address Principal Business Office **130 Burnt Swamp Road** City **Cumberland** State **RI** Zip **02864**

4. Business Phone No. **(401) 333-5712** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**

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

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

<b>President Name</b> Peter Marsh	<b>Vice President Name</b> Anne Marsh
<b>Street Address</b> 130 Burnt Swamp Road	<b>Street Address</b> 130 Burnt Swamp Road
<b>City</b> Cumberland <b>State</b> RI <b>Zip</b> 02864	<b>City</b> Cumberland <b>State</b> RI <b>Zip</b> 02864
<b>Secretary Name</b> Anne Marsh	<b>Treasurer Name</b> Peter Marsh
<b>Street Address</b> 130 Burnt Swamp Road	<b>Street Address</b> 130 Burnt Swamp Road
<b>City</b> Cumberland <b>State</b> RI <b>Zip</b> 02864	<b>City</b> Cumberland <b>State</b> RI <b>Zip</b> 02864

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

<b>Director Name</b> None	<b>Director Name</b>
<b>Street Address</b>	<b>Street Address</b>
<b>City</b> <b>State</b> <b>Zip</b>	<b>City</b> <b>State</b> <b>Zip</b>
<b>Director Name</b>	<b>Director Name</b>
<b>Street Address</b>	<b>Street Address</b>
<b>City</b> <b>State</b> <b>Zip</b>	<b>City</b> <b>State</b> <b>Zip</b>

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

**AUTHORIZED SHARES**

Number of Shares	Class/Series	Par Value
<b>100 SHS</b>	<b>NO PAR VAL</b>	

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

**ISSUED SHARES**

Number of Shares	Class/Series	Par Value
<b>10</b>	<b>Common</b>	<b>No Par</b>

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



\* 3 2 9 3 1 \*

File Date: Feb 16, 1999

Check No.: 8346

By: [Signature]

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] 2-10-99  
Signature of Officer Date

PETER MARSH  
Print or Type Name of Officer

President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **32931** 2. Name of Corporation **MARSH BUILDERS, INC.**  
3. Street Address Principal Business Office **130 Burnt Swamp Road** City **Cumberland** State **RI** Zip **02864**  
4. Business Phone No. **(401) 333-5712** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0034**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**General Construction**

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name <b>Peter Marsh</b>	Vice President Name <b>Anne Marsh</b>
Street Address <b>130 Burnt Swamp Road</b>	Street Address <b>130 Burnt Swamp Road</b>
City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>
Secretary Name <b>Anne Marsh</b>	Treasurer Name <b>Peter Marsh</b>
Street Address <b>130 Burnt Swamp Road</b>	Street Address <b>130 Burnt Swamp Road</b>
City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name <b>None</b>	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

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<b>100 SHS NO PAR VAL</b>		

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<b>10</b>	<b>Common</b>	<b>No Par</b>

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



File Date: 2.20.98  
Check No.: 8052  
By: [Signature]  
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] 2-6-98  
Signature of Officer Date  
**PETER MARSH**  
Print or Type Name of Officer  
**President**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT 1997**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **32931** 2. Name of Corporation **MARSH BUILDERS, INC.**  
 3. Street Address Principal Business Office **256 Burnt Swamp Road** City **Cumberland** State **RI** Zip **02864**  
 4. Business Phone No. **(401) 333-5712** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0034**  
 7. Brief Description of the Character of Business Conducted in Rhode Island  
**General Construction**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)**

President Name <b>Peter Marsh</b>	Vice President Name <b>Anne Marsh</b>
Street Address <b>256 Burnt Swamp Road</b>	Street Address <b>256 Burnt Swamp Road</b>
City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>
Secretary Name <b>Anne Marsh</b>	Treasurer Name <b>Peter Marsh</b>
Street Address <b>256 Burnt Swamp Road</b>	Street Address <b>256 Burnt Swamp Road</b>
City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>	City <b>Cumberland</b> State <b>RI</b> Zip <b>02864</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)**

Director Name <b>None</b>	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

**10. SHARES AUTHORIZED AND ISSUED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>100 SHS NO PAR VAL</b>			<b>10</b>	<b>Common</b>	<b>No Par</b>

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



File Date: 2/20/97  
 Check No.: 748  
 By: [Signature]

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 Officer: [Signature] Date: 2/15/97  
**PETER MARSH**  
 Print or Type Name of Officer  
**President**  
 Title of Officer

# PROFIT CORPORATION ANNUAL REPORT

# 1996



State of Rhode Island and Providence Plantations  
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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 32931		2. NAME OF CORPORATION MARSH BUILDERS, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 256 Burnt Swamp Road		CITY Cumberland	STATE RI
4. BUSINESS PHONE NO. (401) 333-5712		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 0034
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND General Construction			

8. NAMES AND ADDRESSES OF THE OFFICERS		
PRESIDENT NAME Peter Marsh	VICE PRESIDENT NAME Anne Marsh	
STREET ADDRESS 256 Burnt Swamp Road	STREET ADDRESS 256 Burnt Swamp Road	
CITY Cumberland	STATE RI	ZIP CODE 02864
CITY Cumberland	STATE RI	ZIP CODE 02864
SECRETARY NAME Peter Marsh	TREASURER NAME Anne Marsh	
STREET ADDRESS 256 Burnt Swamp Road	STREET ADDRESS 256 Burnt Swamp Road	
CITY Cumberland	STATE RI	ZIP CODE 02864
CITY Cumberland	STATE RI	ZIP CODE 02864

9. NAMES AND ADDRESSES OF THE DIRECTORS		
DIRECTOR NAME None	DIRECTOR NAME	
STREET ADDRESS	STREET ADDRESS	
CITY	STATE	ZIP CODE
CITY	STATE	ZIP CODE
DIRECTOR NAME	DIRECTOR NAME	
STREET ADDRESS	STREET ADDRESS	
CITY	STATE	ZIP CODE
CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100 SHS	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

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.

File Date: 2-12-96  
Check No: 7414  
By: [Signature]  
For Secretary of State Use Only

[Signature]  
Signature of Officer  
PETER MARSH  
Print or Type Name of Officer  
President  
Title of Officer  
2/5/96  
Date



**ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.**

Corporate ID: 0032931 Annual Report for the year: 1995

Name of Corporation: MARSH BUILDERS, INC.

Business entity organized under the laws of the State of: Rhode Island Business Entity is (check one):

For foreign entity, address and telephone number of principal office: \_\_\_\_\_  
 Business Corporation (See RIGL Chapter 7-1.1)  
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ( ) \_\_\_\_\_

Brief statement of the character of business conducted in Rhode Island:  
General Construction

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):  
256 Burnt Swamp Road  
Cumberland, RI 02864  
 Phone: ( 401 ) 333-5712

**THE NAMES OF THE OFFICERS ARE:**

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Peter Marsh	256 Swamp Road	Cumberland, RI	02864
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Anne Marsh	256 Swamp Road	Cumberland, RI	02864
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Anne Marsh	256 Swamp Road	Cumberland, RI	02864
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Peter Marsh	256 Swamp Road	Cumberland, RI	02864

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
100	Common	10	Common

Date February 8, 1995

By: *Peter Marsh* MARSH BUILDERS, INC.  
 Peter Marsh  
 PRINT OR TYPE THE NAME OF OFFICER SIGNING  
 President  
 TITLE OF OFFICER 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.

Phillip Koutsogiane  
 313 Stadium Building  
 Woonsocket, RI 02895

**FILED**  
 FEB 15 1995  
 By DC# 7024

PLEASE TYPE or PRINT  
 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

File Annually  
 LLC Sept 1 - Nov 1  
 CORP Jan 1 - March 1

Corporate ID: 0032931 Annual Report for the year: 1994

Name of Business Entity: MARSH BUILDERS, INC.

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

256 Burnt Swamp Road  
Cumberland, RI 02864

Phone: 401 333-5712

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-11)
- Professional Service Corporation (See RIGL Chapter 7-5-1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Phillip Koutsogiannis, Esq.  
313 Stadium Building  
Woonsocket, RI 02895

Brief statement of the character of business conducted in Rhode Island:  
General Construction

Date of Organization: December 31, 1984

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

- CHIEF EXECUTIVE OFFICER /  PRESIDENT /  SECRETARY  
Peter Marsh, 256 Burnt Swamp Road, Cumberland, RI 02864
- CHIEF FINANCIAL OFFICER /  VICE PRESIDENT /  TREASURER  
Anne Marsh, 256 Burnt Swamp Road, Cumberland, RI 02864
- CUSTODIAN OF RECORDS /  SECRETARY /  TREASURER  
Anne Marsh, 256 Burnt Swamp Road, Cumberland, RI 02864
- CHIEF FINANCIAL OFFICER /  TREASURER /  SECRETARY  
Peter Marsh, 256 Burnt Swamp Road, Cumberland, RI 02864

THE NAMES OF THE DIRECTORS ARE:

- NAME: \_\_\_\_\_ STREET ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_
- NAME: \_\_\_\_\_ STREET ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_
- NAME: \_\_\_\_\_ STREET ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
NUMBER	100	NUMBER	10
CLASS	Common	CLASS	Common
SERIES		SERIES	
PAR VALUE OR WITHOUT PAR	No Par	PAR VALUE OR WITHOUT PAR	No Par

**FILED**  
 FEB 28 1994  
 BY 6733/PL

Date February 1, 1994 By: Peter Marsh

Peter Marsh  
 PRINT OR TYPE NAME OF OFFICER OR DIRECTOR  
President  
 TITLE OF OFFICER OR DIRECTOR

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

PHILLIP KOUTSOGIANES  
 SUITE 313 STADIUM BLDG.  
 WOONSOCKET RI 02895

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

# State of Rhode Island and Providence Plantations

6320/mar

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....3.2931..... Annual Report for the year..1993.....

FIRST: The name of the corporation is... MARSH BUILDERS, INC. ....

SECOND: It is incorporated under the laws of... Rhode Island .....

THIRD: Character of business, briefly stated, is... General construction .....

FOURTH: If foreign corporation, address of its principal office... N/A .....

FIFTH: Business address in Rhode Island... 256 Burnt Swamp Road, Cumberland, RI 02864 .....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Peter Marsh.....	President	256 Burnt Swamp Road, Cumberland, RI 02864
Anne Marsh.....	Vice President	256 Burnt Swamp Road, Cumberland, RI 02864
Anne Marsh.....	Secretary	256 Burnt Swamp Road, Cumberland, RI 02864
Peter Marsh.....	Treasurer	256 Burnt Swamp Road, Cumberland, RI 02864

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	PAID FEB 23 1993	without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
10	Common	SECY OF STATE	without par value

Dated February 15 19 93

MARSH BUILDERS, INC.

(Name of Corporation)

By (s) 

Title President

(Report must be signed by an officer)

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

*11/5/92 5773CK-4*  
**State of Rhode Island and Providence Plantations**

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....3.2931..... Annual Report for the year...1992.....

FIRST: The name of the corporation is MARSH BUILDERS, INC.

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.....	Director	.....
.....	Director	.....
<u>Peter Marsh</u>	<u>President</u>	<u>256 Burnt Swamp Road, Cumberland, RI 02864</u>
<u>Anne Marsh</u>	<u>Vice President</u>	<u>256 Burnt Swamp Road, Cumberland, RI 02864</u>
<u>Anne Marsh</u>	<u>Secretary</u>	<u>256 Burnt Swamp Road, Cumberland, RI 02864</u>
<u>Peter Marsh</u>	<u>Treasurer</u>	<u>256 Burnt Swamp Road, Cumberland, RI 02864</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
10	Common		without par value

**PAID**  
**FEB 28 1992**  
SECY OF STATE

Dated February 15 19 92

MARSH BUILDERS, INC.  
(Name of Corporation)

By (x) *Peter Marsh*

(Report must be signed by an officer)

Title President

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....32931..... Annual Report for the year.....1991.....

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.....	Director	.....
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<u>Anne Marsh</u>	<u>Vice President</u>	<u>256 Burnt Swamp Road, Cumberland, RI 02864</u>
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SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>	<u>Common</u>	<u>PAID</u> <u>REG 4 - 1991</u> <u>REGISTRY OF STATE</u>	<u>without par value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>10</u>	<u>Common</u>	<u>OP</u>	<u>without par value</u>

Dated February 15 19 91

MARSH BUILDERS, INC.

(Name of Corporation)

By (s) [Signature] Pres.

(Report must be signed by an officer)

Title President

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....3.2931..... Annual Report for the year.....1990.....

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.....	Director	.....
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Anne Marsh	Vice President	256 Burnt Swamp Road, Cumberland, RI 02864
Anne Marsh	Secretary	256 Burnt Swamp Road, Cumberland, RI 02864
Peter Marsh	Treasurer	256 Burnt Swamp Road, Cumberland, RI 02864

SEVENTH: Number of Shares authorized:

No. of Shares	Class
100	Common

Par Value  
or statement that  
shares are without  
par value

without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
10	Common

Par Value  
or statement that  
shares are without  
par value

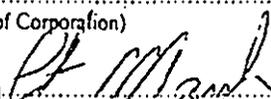
without par value

Dated.....February 15,.....19 90.....

MARSH BUILDERS, INC.

(Name of Corporation)

By (X).....



Title.....President.....

(Report must be signed by an officer)

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903



Corporate ID.....32931..... Annual Report for the year ..1989.....

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.....	Director	.....
.....	Director	.....
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Anne Marsh.....	Vice President	..256..Burnt..Swamp..Road,..Cumberland,..RI. 02864
Anne Marsh.....	Secretary	..256..Burnt..Swamp..Road,..Cumberland,..RI. 02864
Peter Marsh.....	Treasurer	..256..Burnt..Swamp..Road,..Cumberland,..RI. 02864

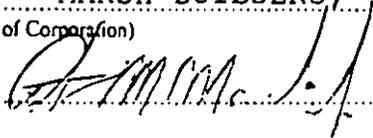
SEVENTH: Number of Shares authorized:

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EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
10	Common	SECY OF STATE	without par value

Dated.....February 8..... 19 89.....

MARSH BUILDERS, INC.  
(Name of Corporation)  
By (x)   
Title.....President.....

(Report must be signed by an officer)

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....32931..... Annual Report for the year...1988.....

FIRST: The name of the corporation is... MARSH BUILDERS, INC. ....

SECOND: It is incorporated under the laws of... Rhode Island .....

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EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
10	Common		without par value

PAID  
MAR 20 1988  
CLERK OF SUPERIOR COURT  
PROVIDENCE, RHODE ISLAND

Dated February 1 19 88

MARSH BUILDERS, INC.

(Name of Corporation)

By (x) .....

Title..... President.....

(Report must be signed by an officer)

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

32931 Annual Report for the year 1987

FIRST: The name of the corporation is MARSH BUILDERS, INC.

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	Director	
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Peter Marsh	Treasurer	256 Burnt Swamp Road, Cumberland, RI 02864

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		without par value

APR 08 1987  
A

EIGHTH: Number of Shares issued:

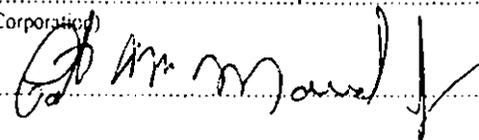
No. of Shares	Class	Series	Par Value or statement that shares are without par value
10	Common		without par value

Dated February 17 19 87

MARSH BUILDERS, INC.

(Name of Corporation)

By (X)



Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 32931

Annual Report for the year ~~1985~~ 1986

FIRST: The name of the corporation is MARSH BUILDERS, INC.

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(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Peter Marsh	President	256 Burnt Swamp Road, Cumberland, RI 02864
Anne Marsh	Vice President	s/a/a
Anne Marsh	Secretary	s/a/a
Peter Marsh	Treasurer	s/a/a

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
10	Common		without par value

Dated February 11 1985 *LP* MARSH BUILDERS, INC.  
(Name of Corporation)

RECEIVED MAR 1985

By *Peter Marsh*

(Report must be signed by an officer)

Title President