



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. 1333		2. Name of Corporation Brian R. Arnold Construction Co., Inc.			
3. Street Address Principal Business Office 18 TEWS COURT			City NEWPORT	State R.I	Zip 02840
4. Business Phone No. 401 847 1150		5. State of Incorporation RHODE ISLAND		6. SIC Code 34	
7. Brief Description of the Character of Business Conducted in Rhode Island BUILDING, CONSTRUCTION AND RELATED ACTIVITES					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name BRIAN R. ARNOLD			Vice President Name		
Street Address 56 POPLAR ST.			Street Address		
City Newport	State R.I	Zip 02840	City	State	Zip
Secretary Name BRIAN R. ARNOLD			Treasurer Name BRIAN R. ARNOLD		
Street Address 56 POPLAR ST.			Street Address 56 POPLAR ST		
City Newport	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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
500 NO PAR VALUE			500	COMMON	

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



File Date: 1/28/05
Check No.: 3665
By: DA
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 of Officer: Brian R. Arnold
Date: 1-13-05
Print or Type Name of Officer: BRIAN R. ARNOLD
Title of Officer: PRESIDENT

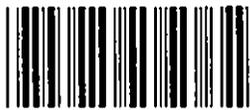


PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

1. Corporate ID No. 1333		2. Name of Corporation Brian R. Arnold Construction Co., Inc.			
3. Street Address Principal Business Office 18 TEWS COURT			City NEWPORT	State RI	Zip 02840
4. Business Phone No. 401 847 1150		5. State of Incorporation RHODE ISLAND		6. SIC Code 34	
7. Brief Description of the Character of Business Conducted in Rhode Island BUILDING, CONSTRUCTION AND RELATED ACTIVITES					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name BRIAN R. ARNOLD			Vice President Name		
Street Address 56 Poplar STREET			Street Address		
City NEWPORT	State RI	Zip 02840	City	State	Zip
Secretary Name BRIAN R. ARNOLD			Treasurer Name BRIAN R. ARNOLD		
Street Address 56 Poplar STREET			Street Address 56 Poplar STREET		
City Newport	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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
500 NO PAR VALUE			500	COMMON	

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



* 1 3 3 3 *

File Date 2-13-04
Check No. 12252
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
BRIAN R. ARNOLD
Date
Print or Type Name of Officer
PRESIDENT
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **1333** 2. Name of Corporation **Brian R. Arnold Construction Co., Inc.**
3. Street Address Principal Business Office **18 Tews Court** City **Newport** State **RI** Zip **02840**
4. Business Phone No. **847-1150** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**

7. Brief Description of the Character of Business Conducted in Rhode Island
Renovation, Restoration, Custom Homes

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

President Name Brian R. Arnold Street Address 56 Poplar Street City Newport State RI Zip 02840	Vice President Name Street Address City State Zip
Secretary Name Brian R. Arnold Street Address 56 Poplar Street City Newport State RI Zip 02840	Treasurer Name Brian R. Arnold Street Address 56 Poplar Street City Newport State RI Zip 02840

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
Number of Shares Class/Series Par Value
500 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
500 COMMON

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



* 1 3 3 3 *

File Date: 3-28-03
Check No.: 10777
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] 2/06/03
Signature of Officer Date

BRIAN R. ARNOLD
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. 1333 2. Name of Corporation Brian R. Arnold Construction Co., Inc.
3. Street Address Principal Business Office 18 TEWS COURT City NEWPORT State RI Zip 02840
4. Business Phone No. 401 847 1150 5. State of Incorporation RHODE ISLAND 6. SIC Code 34
7. Brief Description of the Character of Business Conducted in Rhode Island
BUILDING CONSTRUCTION & Related Activities

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

President Name	<u>Brian R. Arnold</u>	Vice President Name	
Street Address	<u>56 Poplar Street</u>	Street Address	
City	<u>Newport, R I 02840</u>	City	
Secretary Name	<u>Brian R. Arnold</u>	Treasurer Name	<u>Brian R. Arnold</u>
Street Address	<u>56 Poplar Street</u>	Street Address	<u>56 Poplar Street</u>
City	<u>Newport, R I 02840</u>	City	<u>Newport, R I 02840</u>

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

Director Name		Director Name	
Street Address		Street Address	
City		City	
Director Name		Director Name	
Street Address		Street Address	
City		City	

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

AUTHORIZED SHARES	Class/Series	Par Value
<u>500 NO PAR VALUE</u>		

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

ISSUED SHARES	Class/Series	Par Value
<u>500</u>	<u>Common</u>	

RECEIVED
CORPORATIONS DIVISION
JAN 29 2002

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



* 1 3 3 3 *

File Date: 2-10-02
Check No.: 8868
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] 01/29/02
Signature of Officer Date

Brian R. Arnold
Print or Type Name of Officer

President
Title of Officer



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. **1333** 2. Name of Corporation **Brian R. Arnold Construction Co., Inc.**
3. Street Address Principal Business Office **18 Tews Court** City **Newport** State **R I** Zip **02840**
4. Business Phone No. **847-1150** 5. State of Incorporation **RHODE ISLAND** 6. SIC **34**

7. Brief Description of the Character of Business Conducted in Rhode Island
Building, Construction and Related Activities

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

President Name	Brian R. Arnold	Vice President Name	None
Street Address	56 Poplar Street	Street Address	
Newport	R. I. 02840	City	State Zip
City	State Zip	City	State Zip

Secretary Name	Brian R Arnold	Treasurer Name	Brian R. Arnold
Street Address	56 Poplar Street	Street Address	56 Poplar Street
Newport	R. I. 02840	City	State Zip
City	State Zip	City	State Zip

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

Director Name	None	Director Name	None
Street Address		Street Address	
City	State Zip	City	State Zip

Director Name	None	Director Name	None
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
500 SHS NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series Par Value
500 Common

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



* 1 3 3 3 *

File Date: 1/9
Check No.: 6933
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] 1/6/2001
Signature of Officer Date

Brian R. Arnold

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. **1333** 2. Name of Corporation **Brian R. Arnold Construction Co., Inc.**
3. Street Address Principal Business Office **18 Tewa Court** City **Newport** State **R I** Zip **02840**
4. Business Phone No. **847-1150** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**

7. Brief Description of the Character of Business Conducted in Rhode Island
Building, Construction and Related Activities

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

President Name	Brian R Arnold	Vice President Name	None
Street Address	56 Poplar Street	Street Address	
City	Newport	City	
State	R I	State	
Zip	02840	Zip	
Secretary Name	Brian R Arnold	Treasurer Name	Brian R Arnold
Street Address	56 Poplar Street	Street Address	56 Poplar Street
City	Newport	City	Newport
State	R I	State	R I
Zip	02840	Zip	02840

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

Director Name	None	Director Name	None
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
Director Name	None	Director Name	None
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 SHS NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series Par Value
500 Common

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



* 1 3 3 3 *

PAID

File Date: JAN 21 2000 *401D*

Check No.: SECY OF STATE

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.

Brian R Arnold 1/20/00
Signature of Officer Date

Brian R Arnold
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. 1333 2. Name of Corporation Brian R. Arnold Construction Co., Inc.
3. Street Address Principal Business Office 18 Tews Court City Newport State R I Zip 02840
4. Business Phone No. 847-1150 5. State of Incorporation RHODE ISLAND 6. SIC Code 34

7. Brief Description of the Character of Business Conducted in Rhode Island
Building, Construction and Related Activities

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

President Name <u>Brian R. Arnold</u>	Vice President Name
Street Address <u>56 Poplar Street</u>	Street Address
City <u>Newport, R I</u>	City
State <u>R I</u>	State
Zip <u>02840</u>	Zip
Secretary Name <u>Brian R. Arnold</u>	Treasurer Name <u>Brian R. Arnold</u>
Street Address <u>56 Poplar Street</u>	Street Address <u>56 Poplar Street</u>
City <u>Newport, R I</u>	City <u>Newport, R I</u>
State <u>R I</u>	State <u>R I</u>
Zip <u>02840</u>	Zip <u>02840</u>

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

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

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

AUTHORIZED SHARES	Class/Series	Par Value
<u>500 SHS NO PAR VAL</u>		

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

ISSUED SHARES	Class/Series	Par Value
<u>500</u>	<u>Common</u>	

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



File Date: Feb 16 99
Check No.: 1130
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: _____
Print or Type Name of Officer: Brian R. Arnold
Title of Officer: President



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. **1333** 2. Name of Corporation **Brian R. Arnold Construction Co., Inc.**
3. Street Address Principal Business Office _____ City _____ State _____ Zip _____
4. Business Phone No. _____ 2 Tews Court _____ Newport _____ R I _____ 02840
5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0034**
7. Brief Description of the Character of Business Conducted in Rhode Island

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)
Building, Construction and Related Activities

President Name	Brian R. Arnold	Vice President Name	
Street Address	56 Poplar Street	Street Address	
City	Newport, R. I. 02840	City	
Secretary Name	Brian R. Arnold	Treasurer Name	Brian R. Arnold
Street Address	56 Poplar Street	Street Address	56 Poplar Street
City	Newport, R. I. 02840	City	Newport, R. I. 02840

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

Director Name		Director Name	
Street Address		Street Address	
City		City	
Director Name		Director Name	
Street Address		Street Address	
City		City	

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 SHS NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series Par Value
500 Common

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



File Date: 1.14.98
Check No.: 15139
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.

Brian R. Arnold 1/13/98
Signature of Officer Date

Brian R. Arnold
Print or Type Name of Officer

President 1/13/98
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. **1333** 2. Name of Corporation **Brian R. Arnold Construction Co., Inc.**
3. Street Address Principal Business Office **2 TEWS COURT** City **NEWPORT** State **R. I.** Zip **02840**
4. Business Phone No. **847-1150** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0034**

7. Brief Description of the Character of Business Conducted in Rhode Island
Building, Construction and Related Activities

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

President Name	Brian R. Arnold	Vice President Name	
Street Address	56 Poplar Street	Street Address	
City	Newport, R. I. 02840	City	
Secretary Name	Brian R. Arnold	Treasurer Name	Brian R. Arnold
Street Address	56 Poplar Street	Street Address	56 Poplar Street
City	Newport, R. I. 02840	City	Newport, R. I. 02840

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

Director Name		Director Name	
Street Address		Street Address	
City		City	
Director Name		Director Name	
Street Address		Street Address	
City		City	

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
500 SHS NO PAR VAL			500	Common	

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



File Date: 1/28/97
Check No.: 13988
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.

Brian R Arnold 1/16/97
Signature of Officer Date
Brian R. Arnold
Print or Type Name of Officer
President 1/16/97
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. 1333		2. NAME OF CORPORATION Brian R. Arnold Construction Co., Inc.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 56 Poplar Street			CITY Newport	STATE R. I.	ZIP CODE 02840
4. BUSINESS PHONE NO. 847-1150		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 8888

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Building Construction and related activities

8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Brian R. Arnold			VICE PRESIDENT NAME		
STREET ADDRESS 56 Poplar Street			STREET ADDRESS		
CITY Newport	STATE R. I.	ZIP CODE 02840	CITY	STATE	ZIP CODE
SECRETARY NAME Brian R. Arnold			TREASURER NAME Brian R. Arnold		
STREET ADDRESS 56 Poplar Street			STREET ADDRESS 56 Poplar Street		
CITY Newport	STATE R. I.	ZIP CODE 02840	CITY Newport	STATE R. I.	ZIP CODE 02840

9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME			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
500 SHS NO PAR VAL			500	COMMON	

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.

Brian R. Arnold
Signature of Officer

Brian R. Arnold
Print or Type Name of Officer

President
Title of Officer

1/05/96
Date

File Date: 1/9/96
Check No: 18991
By: [Signature]
For Secretary of State Use Only



ANNUAL REPORT

Please Type or Print
 File Annually - Jan. 1 - March 1
 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

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

Corporate ID: 0001335 Annual Report for the year: 1995

Name of Corporation: Brian R. Arnold Construction Co., Inc.

Business entity organized under the laws of the State of: RI

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

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

Brief statement of the character of business conducted in Rhode Island:
building construction and related activities

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
56 Poplar Street
Newport, RI 02840

Phone: (401) 847-1150

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Brian R. Arnold</u>	<u>56 Poplar Street</u>	<u>Newport, RI</u>	<u>02840</u>
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Brian R. Arnold</u>	<u>56 Poplar Street</u>	<u>Newport, RI</u>	<u>02840</u>
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Brian R. Arnold</u>	<u>56 Poplar Street</u>	<u>Newport, RI</u>	<u>02840</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Brian R. Arnold</u>	<u>56 Poplar Street</u>	<u>Newport, RI</u>	<u>02840</u>
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 <u>500</u>	Class / Series <u>common</u>	Number of Shares <u>500</u>	Class / Series <u>common</u>

Date January 5, 19 95

By: Brian R. Arnold
 PRINT OR TYPE NAME OF OFFICER SIGNING
President
 TITLE OF OFFICER SIGNING

Form 31 1/95

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.

BRIAN R. ARNOLD
 56 POPLAR STREET
 NEWPORT RI 02840

FILED
 JUN 1 1995
 By: [Signature]
 1185-6

Filing Fee \$50.00
Payable to:
Secretary of State

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: 0001995 Annual Report for the year: 1994

Name of Business Entity: Brian R. Arnold Construction Co., Inc.

Business entity organized under the laws of the State of RI

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)

56 Poplar Street
Newport, RI 02840

Phone: (401) 847-1150

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-1.1)
- 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:

Brian R. Arnold, President
56 Poplar Street
Newport, RI 02840

Brief statement of the character of business conducted in Rhode Island
building construction and related activities

Date of Organization 7/1/81

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

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) <u>Brian R. Arnold</u>	<u>56 Poplar St.</u>	<u>Newport, RI</u>	<u>02840</u>
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input type="checkbox"/> VICE PRESIDENT (Check One)			
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) <u>Brian R. Arnold</u>	<u>56 Poplar St.</u>	<u>Newport, RI</u>	<u>02840</u>
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) <u>Brian R. Arnold</u>	<u>56 Poplar St.</u>	<u>Newport, RI</u>	<u>02840</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Brian R. Arnold</u>	<u>56 Poplar St.</u>	<u>Newport, RI</u>	<u>02840</u>

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 500

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR without par value

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 500

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR without par value

FILED

MAR 30 1994

By 10873/mmc

Date February 8 1994

By Brian R. Arnold

Brian R. Arnold
PRINT OR TYPE NAME OF OFFICER SIGNING

President
TITLE OF OFFICER SIGNING

Form 31 1994

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.

BRIAN R. ARNOLD
56 POPLAR STREET
NEWPORT RI 02840

Filing Fee \$50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

09930 mnc

Corporate ID 0001388

Annual Report for the year 1993

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and construction business.

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

FIFTH: Business address in Rhode Island 56 Poplar Street, Newport, RI 02840

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

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Brian R. Arnold	President	56 Poplar St., Newport, RI 02840
.....	Vice President	.....
Brian R. Arnold	Secretary	56 Poplar St., Newport, RI 02840
Brian R. Arnold	Treasurer	56 Poplar St., Newport, RI 02840

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
500	Common	-- PAID	Without par value

EIGHTH: Number of Shares issued:

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

Dated: February 16 - - 1993

Brian R. Arnold Construction Co., Inc.
(Name of Corporation)

By Brian R. Arnold

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

MBL CK# 9187

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0001333 Annual Report for the year 1992

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and construction business.

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

FIFTH: Business address in Rhode Island 56 Poplar Street, Newport, RI 02840

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Brian R. Arnold	President	56 Poplar St., Newport, RI 02840
	Vice President	
Brian R. Arnold	Secretary	56 Poplar St., Newport, RI 02840
Brian R. Arnold	Treasurer	56 Poplar St., Newport, RI 02840

SEVENTH: Number of Shares authorized:

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

FEB 28 1992

EIGHTH: Number of Shares issued:

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

SEC'Y OF STATE

Dated March 7 19 92 - Brian R. Arnold Construction Co., Inc.
(Name of Corporation)

By Brian R. Arnold
Title President

(Report must be signed by an officer)

Filing Fee \$50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0001333 Annual Report for the year 1991

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and construction business.

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

FIFTH: Business address in Rhode Island 56 Poplar St., Newport, RI 02840

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

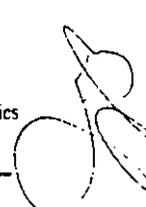
Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Brian R. Arnold	President	56 Poplar St., Newport, RI 02840
.....	Vice President	.....
Brian R. Arnold	Secretary	56 Poplar St., Newport, RI 02840
Brian R. Arnold	Treasurer	56 Poplar St., Newport, RI 02840

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
500	Common	PAID --	Without par value

JAN 27 1991

EIGHTH: Number of Shares issued:

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

Dated January 18, 19 91

Brian R. Arnold Construction Co., Inc.
(Name of Corporation)

By Brian R Arnold

Title President

(Report must be signed by an officer)

Filing Fee \$5.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0001333 Annual Report for the year 1990

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and construction business.

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

FIFTH: Business address in Rhode Island 56 Poplar Street, Newport, RI 02840

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

Name	Office	Address (including number, street, zip code)
------	--------	--

	Director	
	Director	
	Director	
Brian R. Arnold	President	56 Poplar St., Newport, RI 02840
	Vice President	
Brian R. Arnold	Secretary	56 Poplar St., Newport, RI 02840
Brian R. Arnold	Treasurer	56 Poplar St., Newport, RI 02840

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated February 1990 Brian R. Arnold Construction Co., Inc.
(Name of Corporation)

By Brian R. Arnold
Brian R. Arnold
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 1333 Annual Report for the year 1989

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and construction business.

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

FIFTH: Business address in Rhode Island 56 Poplar Street, Newport, RI 02840

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Brian R. Arnold</u>	<u>President</u>	<u>56 Poplar St., Newport, RI 02840</u>
	<u>Vice President</u>	
<u>Brian R. Arnold</u>	<u>Secretary</u>	<u>56 Poplar St., Newport, RI 02840</u>
<u>Brian R. Arnold</u>	<u>Treasurer</u>	<u>56 Poplar St., Newport, RI 02840</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>500</u>	<u>Common</u>	<u>--</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>500</u>	<u>Common</u>	<u>--</u>	<u>Without par value</u>

Dated July 17 19 89 Brian R. Arnold Construction Co., Inc.

(Name of Corporation)

By Brian R. Arnold
Brian R. Arnold

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..... Annual Report for the year 1988

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and construction business.

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

FIFTH: Business address in Rhode Island 56 Poplar Street, Newport, RI 02840

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

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Brian R. Arnold	President	56 Poplar St., Newport, RI 02840
.....	Vice President	.....
Brian R. Arnold	Secretary	56 Poplar St., Newport, RI 02840
Brian R. Arnold	Treasurer	56 Poplar St., Newport, RI 02840

SEVENTH: Number of Shares authorized:

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

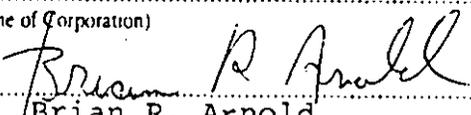
EIGHTH: Number of Shares issued:

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

Dated July 17 19 89

Brian R. Arnold Construction Co., -Inc.-

(Name of Corporation)

By 
Brian R. Arnold

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 1333 Annual Report for the year 1987

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.
INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and
construction business.

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

FIFTH: Business address in Rhode Island 47 Long Wharf Mall, Newport, Rhode Island
02840

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

Name	Office	Address (including number, street, zip code)
Brian R. Arnold	Director	56 Poplar Street, Newport, RI 02840
	Director	
	Director	
Brian R. Arnold	President	56 Poplar Street, Newport, RI 02840
	Vice President	
Brian R. Arnold	Secretary	56 Poplar Street, Newport, RI 02840
Brian R. Arnold	Treasurer	56 Poplar Street, Newport, RI 02840

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued: 500 1987

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

Dated May 7, 19 87

BRIAN R. ARNOLD CONSTRUCTION CO., INC.
(Name of Corporation)

By Brian R. Arnold

Title President (President)

(Report must be signed by an officer)

Filing fee: \$15.00

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

1333

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1986

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a contracting
and construction business.

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

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) c/o SHEFFIELD & HARVEY, 47 Long Wharf Mall, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Brian R. Arnold	Director	56 Poplar Street, Newport, RI
	Director	
	Director	
Brian R. Arnold	President	56 Poplar Street, Newport, RI
	Vice President	
Brian R. Arnold	Secretary	56 Poplar Street, Newport, RI
Brian R. Arnold	Treasurer	56 Poplar Street, Newport, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated: March 1986

BRIAN R. ARNOLD CONSTRUCTION CO., INC.

(Name of Corporation)

By *Brian R. Arnold*

Title President

JUL 29 1986

Arnold

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1333 Annual Report for the year 1985

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.
nc.

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THIRD: Character of business, briefly stated, is operation of a contracting and
construction business.

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

FIFTH: Business address in Rhode Island c/o SHEFFIELD & HARVEY
47 Long Wharf Mall
Newport, Rhode Island 02840

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

Name	Office	Address (including number, street, zip code)
Brian R. Arnold	Director	56 Poplar Street, Newport, RI
	Director	
	Director	
Brian R. Arnold	President	56 Poplar Street, Newport, RI
	Vice President	
Brian R. Arnold	Secretary	56 Poplar Street, Newport, RI
Brian R. Arnold	Treasurer	56 Poplar Street, Newport, RI

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated March 19, 19 85 *LR* BRIAN R. ARNOLD CONSTRUCTION CO., INC.
(Name of Corporation)

RECEIVED MAR 1985

By Brian R. Arnold

(Report must be signed by an officer)

Title President

Brian R. Arnold Construction Co., Inc.
BRIAN R. ARNOLD
56 POPLAR STREET
NEWPORT RI

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is
BRIAN R. ARNOLD CONSTRUCTION CO., INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a
contracting and construction business.

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

FIFTH: Business address in Rhode Island
c/o SHEFFIELD & HARVEY
47 Long Wharf Mall, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Brian R. Arnold	Director	56 Poplar Street, Newport, RI
	Director	
	Director	
Brian R. Arnold	President	56 Poplar Street, Newport, RI
Vacant	Vice President	
Brian R. Arnold	Secretary	56 Poplar Street, Newport, RI
Brian R. Arnold	Treasurer	56 Poplar Street, Newport, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	9	Without Par Value

Dated: Feb 13 1984

BRIAN R. ARNOLD CONSTRUCTION CO., INC.
(Name of Corporation)

By: *Brian R. Arnold*
Brian R. Arnold
Title: President

MAR 7 1984

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1983

FIRST: The name of the corporation is Brian R. Arnold Construction Co., Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to operate a contracting and construction business.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 47 Long Wharf Mall, Newport, Rhode Island 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Brian R. Arnold	President	56 Poplar Street, Newport, RI
	Vice President	
Brian R. Arnold	Secretary	56 Poplar Street, Newport, RI
Brian R. Arnold	Treasurer	56 Poplar Street, Newport, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated: May 11, 19 83

BRIAN R. ARNOLD CONSTRUCTION CO., INC.

(Name of Corporation)

MAY 18 1983
LR

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83

72
By
72
By
72
By

By: *Brian R. Arnold*
President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is Brian R. Arnold Construction Company, Inc.

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THIRD: Character of business, briefly stated, is Contracting and Construction business

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

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 56 Poplar Street, Newport, Rhode Island 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
<u>Brian R. Arnold</u>	<u>President</u>	<u>56 Poplar Street Newport, Rhode Island 02840</u>
	<u>Vice President</u>	
<u>Brian R. Arnold</u>	<u>Secretary</u>	<u>56 Poplar Street Newport, Rhode Island 02840</u>
<u>Brian R. Arnold</u>	<u>Treasurer</u>	<u>56 Poplar Street Newport, Rhode Island 02840</u>

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>500</u>	<u>Common</u>	<u>none</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>100</u>	<u>Common</u>	<u>none</u>	<u>without par value</u>

Dated: Nov 4 19 82

BRIAN R. ARNOLD CONSTRUCTION CO., INC.
(Name of Corporation)

By Brian R. Arnold
Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

NOV 5 1982 *Im*