



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 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 25134	2. Name of Corporation LYN CONTRACTING COMPANY		
3. Street Address Principal Business Office 221 HALLENE ROAD	City WARWICK	State RI	Zip 02886
4. Business Phone No. 4017373900	5. State of Incorporation RHODE ISLAND	6. SIC Code 59	

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

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

President Name William M. Clavin			Vice President Name n/a		
Street Address 221 Hallene Road			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name William M. Clavin			Treasurer Name William M. Clavin		
Street Address 221 Hallene Road			Street Address 221 Hallene Road		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886

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

Director Name n/a			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	Class/Series	Par Value
1,000 NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
88	common	no par value

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



2 5 1 3 4

25134 DBC 01/06/05 09:54:25 AM

File Date: 1/31/05

Check No: 005792

By: S.C.

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
William M. Clavin

Date

Print or Type Name of Officer

President

Title of Officer

Form 630 12/01



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

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 2004

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No *25134*		2. Name of Corporation LYN CONTRACTING COMPANY		
3. Street Address Principal Business Office 221 HALLENE RD		City WARWICK	State RI	Zip 02886
4. Business Phone No 4017373900		5. State of Incorporation RHODE ISLAND		6. SIC Code 59
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL CONTRACTING				

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

President Name WILLIAM M. CLAVIN			Vice President Name N/A		
Street Address 221 HALLENE RD			Street Address		
City WARWICK	State RI	Zip 02886	City	State	Zip
Secretary Name WILLIAM M. CLAVIN			Treasurer Name WILLIAM M. CLAVIN		
Street Address 221 HALLENE RD			Street Address 221 HALLENE RD		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02886

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

Director Name N/A			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) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE		88	COMMON	NO PAR VALUE

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



**25134* 1/9/0312:33:43 PM*

File Date 4/19/04

Check No 0005723

By: W.

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 [Signature] Date 4/12/04

William M. Clavin

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 IN BLACK)

1. Corporate ID No. *25134*		2. Name of Corporation LYN CONTRACTING COMPANY			
3. Street Address Principal Business Office 221 HALLENE RD			City WARWICK	State RI	Zip 02886
4. Business Phone No. 4017373900		5. State of Incorporation RHODE ISLAND			6. SIC Code 59
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL CONTRACTING					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WILLIAM M. CLAVIN			Vice President Name N/A		
Street Address 221 HALLENE RD			Street Address .		
City WARWICK	State RI	Zip 02886	City .	State .	Zip .
Secretary Name WILLIAM M. CLAVIN			Treasurer Name WILLIAM M. CLAVIN		
Street Address 221 HALLENE RD			Street Address .221 HALLENE RD		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02886
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name N/A			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
1,000	NO PAR VALUE		88	COMMON	NO PAR VALUE

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



* 2 5 1 3 4 *

**25134* 1/9/03 12:33:43 PM
File Date 1.28.03
Check No. 5597
By: UP
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 _____ Date _____
William M. Clavin
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. **25134**
2. Name of Corporation **LYN CONTRACTING COMPANY**
3. Street Address Principal Business Office
221 Hallene Road
4. Business Phone No. **737-3900**
5. State of Incorporation **RHODE ISLAND**

City **Warwick** State **RI** Zip **02886**
6. SIC Code **59**

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

general contracting

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

President Name **William M. Clavin**
Street Address **221 Hallene Road**
City **Warwick** State **RI** Zip **02886**

Vice President Name **n/a**
Street Address
City State Zip

Secretary Name **William M. Clavin**
Street Address **221 Hallene Road**
City **Warwick** State **RI** Zip **02886**

Treasurer Name **William M. Clavin**
Street Address **221 Hallene Road**
City **Warwick** State **RI** Zip **02886**

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

Director Name **n/a**
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
1,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
88 common no par value

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



* 2 5 1 3 4 *

File Date: 2-15-02

Check No.: 5473

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] 2/11/02
Signature of Officer Date

William M. Clavin

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. **25134** 2. Name of Corporation **LYN CONTRACTING COMPANY**

3. Street Address Principal Business Office **221 Hallene Road** City **Warwick** State **RI** Zip **02886**

4. Business Phone No. **737-3900** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **59**

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

general contracting

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

President Name William M. Clavin	Vice President Name
Street Address 221 Hallene Road	Street Address
City State Zip Warwick RI 02886	City State Zip

Secretary Name William M. Clavin	Treasurer Name William M. Clavin
Street Address 221 Hallene Road	Street Address 221 Hallene Road
City State Zip Warwick RI 02886	City State Zip Warwick RI 02886

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 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	Class/Series	Par Value
1,000 SHS NO PAR VAL		

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

ISSUED SHARES	Class/Series	Par Value
88	Common	no par value

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



* 2 5 1 3 4 *

File Date: 3-9-01

Check No.: 5274

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] 2/23/01
Signature of Officer Date

William M. Clavin
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. 25134		2. Name of Corporation LYN CONTRACTING COMPANY	
3. Street Address Principal Business Office 221 Hallene Road		City Warwick	State RI
4. Business Phone No. 737-3900		5. State of Incorporation RHODE ISLAND	
7. Brief Description of the Character of Business Conducted in Rhode Island general contracting		6. SIC Code 59	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name William M. Clavin		Vice President Name None	
Street Address 15 Cedar Pond Drive, Apt. 11		Street Address	
City Warwick	State RI	City	State
Zip 02886		Zip	
Secretary Name William M. Clavin		Treasurer Name William M. Clavin	
Street Address 15 Cedar Pond Drive, Apt. 11		Street Address 15 Cedar Pond Drive, Apt. 11	
City Warwick	State RI	City Warwick	State RI
Zip 02886		Zip 02886	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name None		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
1,000 SHS NO PAR VAL			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
88	Common	no par value	

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



* 2 5 1 3 4 *

File Date: 3/14/00

Check No.: 4868

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] 3/10/00
Signature of Officer Date

William M. Clavin

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. 25134		2. Name of Corporation LYN CONTRACTING COMPANY			
3. Street Address Principal Business Office 221 Hallene Road			City Warwick	State RI	Zip 02886
4. Business Phone No. 737-3900		5. State of Incorporation RHODE ISLAND			6. SIC Code 59
7. Brief Description of the Character of Business Conducted in Rhode Island general contracting					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William M. Clavin			Vice President Name None		
Street Address 15 Cedar Pond Drive, Apt. 11			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name William M. Clavin			Treasurer Name William M. Clavin		
Street Address 15 Cedar Pond Drive, Apt. 11			Street Address 15 Cedar Pond Drive, Apt. 11		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
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
1,000 SHS NO PAR VAL			88	Common	no par value

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



* 2 5 1 3 4 *

File Date: March 4, 1999
Check No.: 3979
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] 2/26/99
Signature of Officer Date

William M. Clavin
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. **25134** 2. Name of Corporation **LYN CONTRACTING COMPANY**

3. Street Address Principal Business Office **221 Hallene Road** City **Warwick** State **RI** Zip **02886**

4. Business Phone No. **737-3900** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0059**

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

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

President Name **William M. Clavin**
Street Address **15 Cedar Pond Drive, Apt. 11**
City **Warwick** State **RI** Zip **02886**

Vice President Name **None**
Street Address
City State Zip

Secretary Name **William M. Clavin**
Street Address **15 Cedar Pond Drive, Apt. 11**
City **Warwick** State **RI** Zip **02886**

Treasurer Name **William M. Clavin**
Street Address **15 Cedar Pond Drive, Apt. 11**
City **Warwick** State **RI** Zip **02886**

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

Director Name **None**
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
1,000 SHS	NO PAR VAL	

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

ISSUED SHARES	Class/Series	Par Value
100	Common	No par value

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



* 2 5 1 3 4 *

File Date: 2.9.98
Check No.: 3103
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 2/2/98
Signature of Officer

William M. Clavin
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. 25134
 2. Name of Corporation LYN CONTRACTING COMPANY
 3. Street Address Principal Business Office
 221 Hallene Road
 4. Business Phone No. 737-3900
 5. State of Incorporation RHODE ISLAND
 7. Brief Description of the Character of Business Conducted in Rhode Island
 General Contracting

City Warwick State RI Zip 02886
 6. SIC Code 0059

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

President Name WILLIAM M. CLAVIN
 Street Address 15 Cedar Pond Drive, Apt. 11
 City Warwick State RI Zip 02886

Vice President Name NONE
 Street Address
 City State Zip

Secretary Name WILLIAM M. CLAVIN
 Street Address 15 Cedar Pond Drive, Apt. 11
 City Warwick State RI Zip 02886

Treasurer Name WILLIAM M. CLAVIN
 Street Address 15 Cedar Pond Drive, Apt. 11
 City Warwick State RI Zip 02886

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

Director Name NONE
 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 AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
 Number of Shares Class/Series Par Value
 1,000 COMMON NO PAR VALUE

ISSUED SHARES
 Number of Shares Class/Series Par Value
 100 COMMON NO PAR VALUE

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

File Date: 4.17.97
 Check No.: 2433
 By: ICP

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: 4/14/97
 WILLIAM M. CLAVIN
 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. 25134		2. NAME OF CORPORATION LYN CONTRACTING COMPANY			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 221 Hallene Road			CITY Warwick	STATE RI	ZIP CODE 02886
4. BUSINESS PHONE NO. 737-3900		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 0059
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND General Contracting					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME William M. Clavin			VICE PRESIDENT NAME		
STREET ADDRESS 12 High Street			STREET ADDRESS		
CITY Jamestown	STATE RI	ZIP CODE 02835	CITY	STATE	ZIP CODE
SECRETARY NAME William M. Clavin			TREASURER NAME William M. Clavin		
STREET ADDRESS 12 High Street			STREET ADDRESS 12 High Street		
CITY Jamestown	STATE RI	ZIP CODE 02835	CITY Jamestown,	STATE RI	ZIP CODE 02835
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
1000	COMMON	NO PAR VALUE	100	COMMON	NO PAR VALUE

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: 3/14/96

Check No: 0001634

By: *W*

For Secretary of State Use Only

Signature of Officer

William M. Clavin
Print or Type Name of Officer

President

Title of Officer

X 3/11/96
Date

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

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.

0025134

1995

Corporate ID: _____ Annual Report for the year: _____

LYN CONTRACTING COMPANY

Name of Corporation: _____

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:

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

General Contracting

221 Hallene Road

Warwick, RI 02886

Phone: (401) 737-3900

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Marylyn I. Clavin	104 Bow Street, Jamestown, RI	02835	
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
William M. Clavin	One Helm Street, Jamestown, RI	02835	
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Marylyn I. Clavin	104 Bow Street, Jamestown, RI	02835	
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
William M. Clavin	One Helm Street, Jamestown, RI	02835	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NONE			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
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
1,000	Common	100	Common

Date: 1/30, 1995

By: William I. Clavin

PRINT OR TYPE NAME OF OFFICER SIGNING

Vice-President

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

JOHN G. EARLE
 322 JEFFERSON BLVD.
 WARWICK RI 02888

FILED

FEB 24 1995

By CC AND P24

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: 0025134 Annual Report for the year: 1994

Name of Business Entity: LYN CONTRACTING COMPANY

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

Federal Taxpayer Identification Number _____

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)

221 Hallene Road
Warwick, RI

Phone (401) 737-3900

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

John G. Earle, Esquire
222 Jefferson Boulevard
Warwick, RI 02888

Brief statement of the character of business conducted in Rhode Island
General Contracting

Date of Organization: 3/18/83

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

THE NAMES OF THE OFFICERS ARE:

- CHIEF EXECUTIVE OFFICER OR PRESIDENT OR CEO: Marylyn I. Clavin, 35 Watson Avenue, Jamestown, RI 02835
- CHIEF FINANCIAL OFFICER OR VICE PRESIDENT & TREASURER: William M. Clavin, One Helm Street, Jamestown, RI 02835
- CUSTODIAN OF RECORDS OR SECRETARY: Marylyn I. Clavin, 35 Watson Avenue, Jamestown, RI 02835
- CHIEF LEGAL COUNSEL OR ATTORNEY AT LAW: William M. Clavin, One Helm Street, Jamestown, RI 02835

THE NAMES OF THE DIRECTORS ARE:

- NAME: NONE
- NAME: _____
- NAME: _____

NUMBER OF SHARES AUTHORIZED (if Applicable)
NUMBER: 1,000
CLASS: Common
SERIES: _____
PAR VALUE OR WITHOUT PAR: No Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)
NUMBER: 100
CLASS: Common
SERIES: _____
PAR VALUE OR WITHOUT PAR: No Par Value

Date: 3/7 19 94

By: [Signature]
William M. Clavin
VICE-PRESIDENT

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

JOHN G. EARLE
222 JEFFERSON BLVD.
WARWICK RI 02888

FILED
MAR 16 1994
By: MP5917891

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0025134 Annual Report for the year 1993

FIRST: The name of the corporation is LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 221 Hallene Road
Warwick, Rhode Island

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Marylyn I. Clavin	President	35 Watson Avenue, Jamestown, RI 02835
William M. Clavin	Vice President	One Helm Street, Jamestown, RI 02835
Marylyn I. Clavin	Secretary	35 Watson Avenue, Jamestown, RI 02835
William M. Clavin	Treasurer	One Helm Street, Jamestown, RI 02835

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	common		no par value

Rec'd & Filed FEB 25 1993

EIGHTH: Number of Shares issued:

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

Handwritten: AUTH#29
7036

Dated 2/15 19 93

LYN CONTRACTING COMPANY
(Name of Corporation)

By William M. Clavin

Title William M. Clavin, Vice-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

906290

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0025134 Annual Report for the year 1992

FIRST: The name of the corporation is LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting

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

FIFTH: Business address in Rhode Island 221 Hallene Road, Warwick, RI

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Marilyn I. Clavin	President	35 Watson Avenue, Jamestown, RI 02835
William M. Clavin	Vice President	One Helm Street, Jamestown, RI
Marilyn I. Clavin	Secretary	35 Watson Avenue, Jamestown, RI 02835
William M. Clavin	Treasurer	One Helm Street, Jamestown, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class
1,000	common

PAID

MAR 25 1992

Par Value
or statement that
shares are without
par value

no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
100	common

SECY OF STATE

Par Value
or statement that
shares are without
par value

no par value

Dated March 1992

LYN CONTRACTING COMPANY

(Name of Corporation)

By [Signature]

Title William M. Clavin, Vice-President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0025134 Annual Report for the year 1991

FIRST: The name of the corporation is LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting

FOURTH: If foreign corporation, address of its principal office

n/a

FIFTH: Business address in Rhode Island

P.O. Box 8889, Warwick, RI 02888

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>Marilyn I. Clavin</u>	<u>President</u>	<u>1511 Suzi St., Punta Gorda, Florida</u>
<u>William M. Clavin</u>	<u>Vice President</u>	<u>One Helm Street, Jamestown, RI</u>
<u>Marilyn I. Clavin</u>	<u>Secretary</u>	
<u>William M. Clavin</u>	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1,000</u>	<u>common</u>		<u>no 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>no par value</u>

PAID
MAR 20 1991
Series
SECY OF STATE

Dated February 6 19 91

LYN CONTRACTING COMPANY
(Name of Corporation)

By Marilyn I. Clavin

Title William M. Clavin, Vice President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0025134.....

Annual Report for the year.....1990.....

FIRST: The name of the corporation is Lyn Contracting Company.....

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

THIRD: Character of business, briefly stated, is.....
general contracting.....

FOURTH: If foreign corporation, address of its principal office.....
n/a.....

FIFTH: Business address in Rhode Island.....
PO Box 8889, Warwick, Rhode Island 02888.....

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

Name	Office	Address (including number, street, zip code)
.....	Director
.....	Director
.....	Director
Marylyn I. Clavin	President	1511 Suzi Street, Punta Gorda, Florida
William M. Clavin	Vice President	One Helm Street, Jamestown, RI
Marylyn I. Clavin	Secretary
William M. Clavin	Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	common		no par value

EIGHTH: Number of Shares issued:

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

PAID

MAR 22 1990

SEC'Y. OF STATE

Dated.....1990.....

LYN CONTRACTING COMPANY
(Name of Corporation)

By William M. Clavin

Title.....Vice 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 25134 Annual Report for the year 1989

FIRST: The name of the corporation is LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is
general contracting

FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island
70 Dewey Avenue, Warwick, Rhode Island

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Marylyn I. Clavin	President	1511 Suzi Street, Punta Gorda, Florida
William M. Clavin	Vice President	One Helm Street, Jamestown, Rhode Island
Marylyn I. Clavin	Secretary	
William M. Clavin	Treasurer	

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

PAID
JUL 09 1989
SECY OF STATE

Dated 11/6 1989

LYN CONTRACTING COMPANY
(Name of Corporation)

By [Signature]
William M. Clavin
Title Vice 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 25134 Annual Report for the year 1988

FIRST: The name of the corporation is LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is
general contracting

FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island
70 Dewey Avenue, Warwick, Rhode Island

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Marylyn I. Clavin	President	1511 Suzi Street, Punta Gorda, Florida
William M. Clavin	Vice President	One Helm Street, Jamestown, Rhode Island
Marylyn I. Clavin	Secretary	
William M. Clavin	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
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EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
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[Signature]
 NOV 19 1989
 SECY OF STATE

Dated 11/6 1989

LYN CONTRACTING COMPANY
(Name of Corporation)

By *[Signature]*
William M. Clavin

Title Vice President

(Report must be signed by an officer)

BRESLIN, SWEENEY & EARLE
ATTORNEYS AT LAW

222 JEFFERSON BOULEVARD
WARWICK, RHODE ISLAND 02888

TELEPHONE: 401-737-8484

TELECOPIER: 401-738-6935

ROBERT H. BRESLIN, JR.
DAVID F. SWEENEY
JOHN G. EARLE
MARK B. HEFFNER
EDWARD P. REIDY

OF COUNSEL:

J. JOSEPH FITZPATRICK
KEVIN A. HACKMAN

November 8, 1989

Clerk
Secretary of State's Office
Corporations Division
270 Westminster Mall
Providence, RI 02903

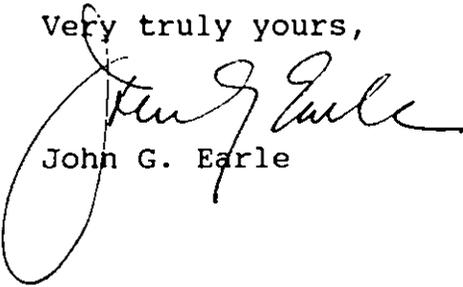
Re: Lynn Contracting Company
ID No. 25134

Dear Clerk:

Enclosed please find Annual Reports for the years 1988 and 1989 and a check in the amount of \$55 to reinstate the Corporate Charter for the above referenced corporation.

If you have any questions, please do not hesitate to contact me.

Very truly yours,



John G. Earle

JGE/b
Enclosures

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 25134 Annual Report for the year 1988

FIRST: The name of the corporation is LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island P.O. Box 889
70 Dewey Avenue, Warwick, Rhode Island 02888

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Marylyn I. Clavin	President	84 Delwood Road, Warwick, R.I.
William M. Clavin	Vice President	172 Bluff Avenue, Cranston, R.I.
Marylyn I. Clavin	Secretary	
William M. Clavin	Treasurer	

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

PAID
MAR 24 1988
SECY OF STATE

Dated February 12, 1988

LYN CONTRACTING COMPANY
(Name of Corporation)

By 
William M. Clavin
Title Vice President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID..... 25134

Annual Report for the year 1987

FIRST: The name of the corporation is..... LYN CONTRACTING COMPANY

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

THIRD: Character of business, briefly stated, is.....
..... general contracting

FOURTH: If foreign corporation, address of its principal office.....
..... n/a

FIFTH: Business address in Rhode Island.....
..... 70 Dewey Avenue, Warwick, RI

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

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

27

Director

Director

Director

Marylyn I. Clavin President Ten Rod Road, Exeter, RI

William M. Clavin Vice President 36 Sabin Street, Warwick, RI

Marylyn I. Clavin Secretary

William M. Clavin Treasurer

SEVENTH: Number of Shares authorized:

Par Value
or statement that
shares are without
par value

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	common		no par value

EIGHTH: Number of Shares issued:

Par Value
or statement that
shares are without
par value

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

PAID

MAR 12 1987

MAR 23 1987

Handwritten signature

Dated..... March 9, 19 87

SECY OF STATE

LYN CONTRACTING COMPANY

(Name of Corporation)

By..... *William M. Clavin*

Title..... Vice President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 25134 Annual Report for the year 1986

FIRST: The name of the corporation is LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 70 Dewey Avenue, Warwick, RI

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Marylyn I. Clavin	President	Ten Rod Road, Exeter, RI
William M. Clavin	Vice President	36 Sabin St., Warwick, RI
Marylyn I. Clavin	Secretary	
William M. Clavin	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	common		no par value

EIGHTH: Number of Shares issued:

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

Dated February 19 86 LYN CONTRACTING COMPANY
(Name of Corporation)

APR 3 1986

(Report must be signed by an officer)

By William M. Clavin
Title Vice President

RECEIVED
MAR 27 1986
PAID

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

25134

Annual Report for the year 1985

FIRST: The name of the corporation is

LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general contracting

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 70 Dewey Avenue, Warwick, RI

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Marylyn I. Clavin	President	Ten Rod Road, Exeter, RI
William M. Clavin	Vice President	36 Sabin St. Warwick, RI
Marylyn I. Clavin	Secretary	
William M. Clavin	Treasurer	

(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
1,000	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: 1/18 1985

LYN CONTRACTING COMPANY

(Name of Corporation)

By: *William M. Clavin*
William M. Clavin

Title Vice 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

APR 9 15.00
02/18/85 PAID
08084001

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

FIRST: The name of the corporation is

LYN CONTRACTING COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Contracting

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

70 Dewey Avenue Warwick, R.I.

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Marylyn I. Clavin	President	Ten Rod Rd. Exeter, R.I.
William M. Clavin	Vice President	900 Post Road Warwick, R.I.
John G. Earle	Secretary	10 Jefferson Blvd. Warwick, R.I.
William M. Clavin	Treasurer	900 Post Road Warwick, R.I.

(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
1000	Common		No par value

EIGHTH: Number of Shares issued:

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

Dated: February 17, 1984

LYN CONTRACTING COMPANY

(Name of Corporation)

By: *John G. Earle*
Title: Secretary

(Report must be signed by an officer)

APR 11 1984
S.R.

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