



**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 88847		2. Name of Corporation Electrical Contractor, Inc.			
3. Street Address Principal Business Office 3510 MAIN STREET			City HARTFORD	State CT	Zip 06120
4. Business Phone No. 860-549-2822		5. State of Incorporation CONNECTICUT		6. SIC Code 273	
7. Brief Description of the Character of Business Conducted in Rhode Island TO PERFORM THE WORK OF A SERVICE/CONSTRUCTION ELECTRICAL CONTRACTOR.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Louis J. Bona			Vice President Name LEOL CHRISTMAS		
Street Address 23 WENTWORTH DRIVE			Street Address 30 FINLEY HILL ROAD		
City EAST HARTFORD	State CT	Zip 06118	City MARLBOROUGH	State CT	Zip 06447
Secretary Name LEOL CHRISTMAS			Treasurer Name LOUIS J. BONA		
Street Address 30 FINLEY HILL ROAD			Street Address 23 WENTWORTH DRIVE		
City MARLBOROUGH	State CT	Zip 06447	City EAST HARTFORD	State CT	Zip 06118
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Louis J. Bona			Director Name LEOL CHRISTMAS		
Street Address 23 WENTWORTH DRIVE			Street Address 30 FINLEY HILL ROAD		
City EAST HARTFORD	State CT	Zip 06118	City MARLBOROUGH	State CT	Zip 06447
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
5,000	\$25.00 PAR VALUE		4,000	COMMON	\$25.00

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



File Date 1/6/05  
Check No. 10802  
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.

Louis J. Bona, Pres. 1-3-05  
Signature of Officer Date  
LOUIS J. BONA  
Print or Type Name of Officer  
PRESIDENT  
Title of Officer

WILLIAM J. FLYNN, JR., VICE PRESIDENT  
156 OLD SNAKE HILL ROAD  
GLOUCESTER, R.I. 02814



**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. <b>88847</b>		2. Name of Corporation <b>Electrical Contractor, Inc.</b>			
3. Street Address Principal Business Office <b>3510 MAIN STREET</b>			City <b>HARTFORD</b>	State <b>CT</b>	Zip <b>06120</b>
4. Business Phone No. <b>860-549-2822</b>		5. State of Incorporation <b>CONNECTICUT</b>		6. SIC Code <b>273</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>TO PERFORM THE WORK OF A SERVICE/CONSTRUCTION ELECTRICAL CONTRACTOR.</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>LOUIS J. BONA</b>			Vice President Name <b>LEOL CHRISTMAS</b>		
Street Address <b>23 WENTWORTH DRIVE</b>			Street Address <b>30 FINLEY HILL ROAD</b>		
City <b>EAST HARTFORD</b>	State <b>CT</b>	Zip <b>06118</b>	City <b>MARLBOROUGH</b>	State <b>CT</b>	Zip <b>06447</b>
Secretary Name <b>LEOL CHRISTMAS</b>			Treasurer Name <b>LOUIS J. BONA</b>		
Street Address <b>30 FINLEY HILL ROAD</b>			Street Address <b>23 WENTWORTH DRIVE</b>		
City <b>MARLBOROUGH</b>	State <b>CT</b>	Zip <b>06447</b>	City <b>EAST HARTFORD</b>	State <b>CT</b>	Zip <b>06118</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>LOUIS J. BONA</b>			Director Name <b>LEOL CHRISTMAS</b>		
Street Address <b>23 WENTWORTH DRIVE</b>			Street Address <b>30 FINLEY HILL ROAD</b>		
City <b>EAST HARTFORD</b>	State <b>CT</b>	Zip <b>06118</b>	City <b>MARLBOROUGH</b>	State <b>CT</b>	Zip <b>06447</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>5,000</b>	<b>\$25.00 PAR VALUE</b>		<b>4,000</b>	<b>COMMON</b>	<b>\$25.00</b>
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
			<b>4,000</b>	<b>COMMON</b>	<b>\$25.00</b>

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



\* 8 8 8 4 7 \*

File Date 1-7-04  
Check No. 09658  
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.

Louis J. Bona, Pres 1-2-04  
Signature of Officer Date  
LOUIS J. BONA  
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. **88847**  
2. Name of Corporation **Electrical Contractor, Inc.**  
3. Street Address Principal Business Office  
**3510 MAIN STREET**  
4. Business Phone No. **860-549-2822**  
5. State of Incorporation **CONNECTICUT**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**ELECTRICAL CONTRACTING**

City **HARTFORD** State **CT** Zip **06120**  
6. SIC Code **273**

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

President Name **LOUIS J. BONA**  
Street Address **23 WENTWORTH DRIVE**  
City **EAST HARTFORD** State **CT** Zip **06118**

Vice President Name **LEO L. CHRISTMAS**  
Street Address **30 FINLEY HILL ROAD**  
City **MARLBOROUGH** State **CT** Zip **06447**

Secretary Name **LEO L. CHRISTMAS**  
Street Address **30 FINLEY HILL ROAD**  
City **MARLBOROUGH** State **CT** Zip **06447**

Treasurer Name **LOUIS J. BONA**  
Street Address **23 WENTWORTH DRIVE**  
City **EAST HARTFORD** State **CT** Zip **06118**

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

Director Name **LOUIS J. BONA**  
Street Address **23 WENTWORTH DRIVE**  
City **EAST HARTFORD** State **CT** Zip **06118**

Director Name **LEO L. CHRISTMAS**  
Street Address **30 FINLEY HILL ROAD**  
City **MARLBOROUGH** State **CT** Zip **06447**

Street Address  
City State Zip

Street Address  
City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
5,000		\$25.00 PAR VALUE

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

ISSUED SHARES	Class/Series	Par Value
4,000	COMMON	\$25.00

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



\* 8 8 8 4 7 \*

File Date: 1-13-03  
Check No.: 8441  
By: dc

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.

Louis J. Bona Pres 1-08-03  
Signature of Officer Date

LOUIS J. BONA  
Print or Type Name of Officer

P  
Title of Officer

WILLIAM J. FLYNN, JR., VICE PRESIDENT  
156 OLD SNAKE HILL ROAD  
GLOUCESTER, RI 02814



**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. **88847**  
2. Name of Corporation **Electrical Contractor, Inc.**  
3. Street Address Principal Business Office  
**3510 MAIN STREET**  
4. Business Phone No. **860-549-2822**  
5. State of Incorporation **CONNECTICUT**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**ELECTRICAL CONTRACTING**

City **HARTFORD** State **CT** Zip **06120**  
6. SIC Code **273**

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

President Name **LOUIS J. BONA**  
Street Address **23 WENTWORTH DRIVE**  
City **EAST HARTFORD** State **CT** Zip **06118**  
Secretary Name **LEO L. CHRISTMAS**  
Street Address **30 FINLEY HILL ROAD**  
City **MARLBOROUGH** State **CT** Zip **06447**

Vice President Name **LEO L. CHRISTMAS**  
Street Address **30 FINLEY HILL ROAD**  
City **MARLBOROUGH** State **CT** Zip **06447**  
Treasurer Name **LOUIS J. BONA**  
Street Address **23 WENTWORTH DRIVE**  
City **EAST HARTFORD** State **CT** Zip **06118**

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

Director Name **LOUIS J. BONA**  
Street Address **23 WENTWORTH DRIVE**  
City **EAST HARTFORD** State **CT** Zip **06118**

Director Name **LEO L. CHRISTMAS**  
Street Address **30 FINLEY HILL ROAD**  
City **MARLBOROUGH** State **CT** Zip **06447**

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  
**5,000 \$25.00 PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**4,000 Common \$25.00**

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



\* 8 8 8 4 7 \*

File Date: **1-22-02**

Check No.: **7184**

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.

**Louis J. Bona Pres. 1-18-02**  
Signature of Officer Date

**LOUIS J. BONA**  
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. **88847**      2. Name of Corporation  
**Electrical Contractor, Inc.**

3. Street Address Principal Business Office  
**3510 MAIN STREET**      City **HARTFORD**      State **CT**      Zip **06120**  
4. Business Phone No. **860-549-2822**      5. State of Incorporation  
**CONNECTICUT**      6. SIC Code  
**273**

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

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

<p>President Name <b>LOUIS J. BONA</b> Street Address <b>23 WENTWORTH DRIVE</b> City <b>EAST HARTFORD</b>      State <b>CT</b>      Zip <b>06118</b> Secretary Name <b>LEO L. CHRISTMAS</b> Street Address <b>30 FINLEY HILL ROAD</b> City <b>MARLBOROUGH</b>      State <b>CT</b>      Zip <b>06447</b></p>	<p>Vice President Name <b>LEO L. CHRISTMAS</b> Street Address <b>30 FINLEY HILL ROAD</b> City <b>MARLBOROUGH</b>      State <b>CT</b>      Zip <b>06447</b> Treasurer Name <b>LOUIS J. BONA</b> Street Address <b>23 WENTWORTH DRIVE</b> City <b>EAST HARTFORD</b>      State <b>CT</b>      Zip <b>06118</b></p>
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**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)      FILL IN SPACES BEFORE USING ATTACHMENTS**

<p>Director Name <b>LOUIS J. BONA</b> Street Address <b>23 WENTWORTH DRIVE</b> City <b>EAST HARTFORD</b>      State <b>CT</b>      Zip <b>06118</b></p>	<p>Director Name <b>LEO L. CHRISTMAS</b> Street Address <b>30 FINLEY HILL ROAD</b> City <b>MARLBOROUGH</b>      State <b>CT</b>      Zip <b>06447</b></p>
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**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares      Class/Series      Par Value  
**5,000 SHS \$25.00 PAR VAL**

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

ISSUED SHARES  
Number of Shares      Class/Series      Par Value  
**4,000      COMMON      \$25.00**

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



\* 8 8 8 4 7 \*

File Date: 1/26  
Check No.: 5927  
By: 2

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.

**Louis J. Bona, Pres.**      1-23-01  
Signature of Officer      Date  
**LOUIS J. BONA**  
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. **88847** 2. Name of Corporation **Electrical Contractor, Inc.**

3. Street Address Principal Business Office **3510 MAIN STREET** City **HARTFORD** State **CT** Zip **06120**  
4. Business Phone No. **860-549-2822** 5. State of Incorporation **CONNECTICUT** 6. SIC Code **273**

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

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

<p>President Name <b>LOUIS J. BONA</b> Street Address <b>23 WENTWORTH DRIVE</b> City State Zip <b>EAST HARTFORD CT 06118</b> Secretary Name <b>LEO L. CHRISTMAS</b> Street Address <b>30 FINLEY HILL ROAD</b> City State Zip <b>MARLBOROUGH CT 06447</b></p>	<p>Vice President Name <b>LEO L. CHRISTMAS</b> Street Address <b>30 FINLEY HILL ROAD</b> City State Zip <b>MARLBOROUGH CT 06447</b> Treasurer Name <b>LOUIS J. BONA</b> Street Address <b>23 WENTWORTH DRIVE</b> City State Zip <b>EAST HARTFORD CT 06118</b></p>
--	---

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

<p>Director Name <b>LOUIS J. BONA</b> Street Address <b>23 WENTWORTH DRIVE</b> City State Zip <b>EAST HARTFORD CT 06118</b></p>	<p>Director Name <b>LEO L. CHRISTMAS</b> Street Address <b>30 FINLEY HILL ROAD</b> City State Zip <b>MARLBOROUGH CT 06447</b></p>
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**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**5,000 SHS \$25.00 PAR VAL**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**4,000 COMMON \$25.00**

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



\* 8 8 8 4 7 \*

File Date: 2/22/00  
Check No.: 4763  
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.

Louis J. Bona Pres. 2/17/00  
Signature of Officer Date  
LOUIS J. BONA  
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. **88847**      2. Name of Corporation **Electrical Contractor, Inc.**

3. Street Address Principal Business Office  
**3510 MAIN STREET**      City **HARTFORD**      State **CT**      Zip **06120**

4. Business Phone No. **860-549-2822**      5. State of Incorporation **CONNECTICUT**      6. SIC Code **273**

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

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

<p>President Name <b>LOUIS J. BONA</b></p> <p>Street Address <b>23 WENTWORTH DRIVE</b></p> <p>City <b>EAST HARTFORD</b>      State <b>CT</b>      Zip <b>06118</b></p> <p>Secretary Name <b>LEO L. CHRISTMAS</b></p> <p>Street Address <b>30 FINLEY HILL ROAD</b></p> <p>City <b>MARLBOROUGH</b>      State <b>CT</b>      Zip <b>06447</b></p>	<p>Vice President Name <b>LEO L. CHRISTMAS</b></p> <p>Street Address <b>30 FINLEY HILL ROAD</b></p> <p>City <b>MARLBOROUGH</b>      State <b>CT</b>      Zip <b>06447</b></p> <p>Treasurer Name <b>LOUIS J. BONA</b></p> <p>Street Address <b>23 WENTWORTH DRIVE</b></p> <p>City <b>EAST HARTFORD</b>      State <b>CT</b>      Zip <b>06118</b></p>
---	--

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

<p>Director Name <b>LOUIS J. BONA</b></p> <p>Street Address <b>23 WENTWORTH DRIVE</b></p> <p>City <b>EAST HARTFORD</b>      State <b>CT</b>      Zip <b>06118</b></p>	<p>Director Name <b>LEO L. CHRISTMAS</b></p> <p>Street Address <b>30 FINLEY HILL ROAD</b></p> <p>City <b>MARLBOROUGH</b>      State <b>CT</b>      Zip <b>06447</b></p>
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<p>10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)</p> <p>AUTHORIZED SHARES</p> <table border="0"> <tr> <th>Number of Shares</th> <th>Class/Series</th> <th>Par Value</th> </tr> <tr> <td><b>5,000 SHS</b></td> <td><b>\$25.00 PAR VAL</b></td> <td></td> </tr> </table>	Number of Shares	Class/Series	Par Value	<b>5,000 SHS</b>	<b>\$25.00 PAR VAL</b>		<p>11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)</p> <p>ISSUED SHARES</p> <table border="0"> <tr> <th>Number of Shares</th> <th>Class/Series</th> <th>Par Value</th> </tr> <tr> <td><b>4,000</b></td> <td><b>COMMON</b></td> <td><b>\$25.00</b></td> </tr> </table>	Number of Shares	Class/Series	Par Value	<b>4,000</b>	<b>COMMON</b>	<b>\$25.00</b>
Number of Shares	Class/Series	Par Value											
<b>5,000 SHS</b>	<b>\$25.00 PAR VAL</b>												
Number of Shares	Class/Series	Par Value											
<b>4,000</b>	<b>COMMON</b>	<b>\$25.00</b>											

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



File Date: 1-19-99

Check No.: 3271

By: AMF

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.

Louis J. Bona, Pres. 1-5-99  
Signature of Officer      Date

LOUIS J. BONA  
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. **88847**      2. Name of Corporation **Electrical Contractor, Inc.**

3. Street Address Principal Business Office  
**3510 MAIN STREET**      City **HARTFORD**      State **CT**      Zip **06120**

4. Business Phone No. **860-549-2822**      5. State of Incorporation **CONNECTICUT**      6. SIC Code **0273**

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

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

President Name <b>LOUIS J. BONA</b>	Vice President Name <b>LEO L. CHRISTMAS</b>
Street Address <b>23 WENTWORTH DRIVE</b>	Street Address <b>30 FINLEY HILL ROAD</b>
City <b>EAST HARTFORD</b> State <b>CT</b> Zip <b>06118</b>	City <b>MARLBOROUGH</b> State <b>CT</b> Zip <b>06447</b>
Secretary Name <b>LEO L. CHRISTMAS</b>	Treasurer Name <b>LOUIS J. BONA</b>
Street Address <b>30 FINLEY HILL ROAD</b>	Street Address <b>23 WENTWORTH DRIVE</b>
City <b>MARLBOROUGH</b> State <b>CT</b> Zip <b>06447</b>	City <b>EAST HARTFORD</b> State <b>CT</b> Zip <b>06118</b>

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

Director Name <b>LOUIS J. BONA</b>	Director Name <b>LEO L. CHRISTMAS</b>
Street Address <b>23 WENTWORTH DRIVE</b>	Street Address <b>30 FINLEY HILL ROAD</b>
City <b>EAST HARTFORD</b> State <b>CT</b> Zip <b>06118</b>	City <b>MARLBOROUGH</b> State <b>CT</b> Zip <b>06447</b>
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	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
5,000 SHS	\$25.00 PAR VAL		4,000	Common	\$ 25.00

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



\* 8 8 8 4 7 \*

File Date: 6-24-98

Check No.: 2377

By: AMR

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.

Louis J. Bona, Pres 6-3-98  
Signature of Officer      Date

LOUIS J. BONA  
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. **88847** 2. Name of Corporation **Electrical Contractor, Inc.**  
3. Street Address Principal Business Office **3510 Main Street** City **Hartford** State **Connecticut** Zip **06120**  
4. Business Phone No. **860/549-2822** 5. State of Incorporation **CONNECTICUT** 6. SIC Code **0273**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**To perform the work of a Service/Construction Electrical Contractor.**

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

President Name <b>Louis J. Bona</b> Street Address <b>3510 Main Street</b> City <b>Hartford</b> State <b>Connecticut</b> Zip <b>06120</b>	Vice President Name <b>Leo L. Christmas</b> Street Address <b>3510 Main Street</b> City <b>Hartford</b> State <b>Connecticut</b> Zip <b>06120</b>
Secretary Name <b>Leo L. Christmas</b> Street Address <b>3510 Main Street</b> City <b>Hartford</b> State <b>Connecticut</b> Zip <b>06120</b>	Treasurer Name <b>Louis J. Bona</b> Street Address <b>3510 Main Street</b> City <b>Hartford</b> State <b>Connecticut</b> Zip <b>06120</b>

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

Director Name <b>Louis J. Bona</b> Street Address <b>3510 Main Street</b> City <b>Hartford</b> State <b>Connecticut</b> Zip <b>06120</b>	Director Name <b>William J. Flynn, Jr.</b> Street Address <b>3510 Main Street</b> City <b>Hartford</b> State <b>Connecticut</b> Zip <b>06120</b>
Director Name <b>Leo L. Christmas</b> Street Address <b>3510 Main Street</b> City <b>Hartford</b> State <b>Connecticut</b> Zip <b>06120</b>	<del>Director Name Street Address City State Zip</del>

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

AUTHORIZED SHARES Number of Shares <b>5,000</b> Class/Series <b>Common</b> Par Value <b>\$25.00</b> <b>5,000 SHS \$25.00 PAR VAL</b>	ISSUED SHARES Number of Shares <b>4,000</b> Class/Series <b>Common</b> Par Value <b>\$25.00</b>
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 8 8 4 7 \*

File Date: 2.3-97  
Check No.: 8901  
By: WP

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.

Louis J. Bona Signature of Officer  
Date January 27, 1997  
Louis J. Bona  
Print or Type Name of Officer  
President  
Title of Officer

# *Electrical Contractors, Inc.*

STATE LIC. #102800, #103327  
3510 MAIN ST. HARTFORD, CONNECTICUT 06120  
(203) 549-2822 FAX (203) 549-7948  
E.O.E. M/F

Corporate I.D. No.: 88847

## ***8. Names and addresses of the officers:***

Vice President of Construction  
William J. Flynn, Jr.  
3510 Main Street  
Hartford, Connecticut 06120