



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. 84654		2. Name of Corporation The H.L. Turner Group Inc.			
3. Street Address Principal Business Office 27 Locke Road			City Concord	State NH	Zip 03301
4. Business Phone No. (603) 228-1122		5. State of Incorporation NEW HAMPSHIRE			6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island ENGINEERING SERVICES/ CONSULTING FIRM					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Harold Turner Jr.			Vice President Name Fuat Ari		
Street Address 45 Range Road			Street Address 96 Hilliard Road		
City Goffstown	State NH	Zip 03045	City Chichester	State NH	Zip 03258
Secretary Name Harold Turner Jr.			Treasurer Name Harold Turner Jr.		
Street Address 45 Range Road			Street Address 45 Range Road		
City Goffstown	State NH	Zip 03045	City Goffstown	State NH	Zip 03045
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Loren Belida			Director Name Gerard Blanchette		
Street Address 81 Preston Street			Street Address 168 Seawalls Falls Road		
City Hillsborough	State NH	Zip 03244	City Concord	State NH	Zip 03301
Director Name William A. Turner			Director Name		
Street Address 26 Pinewood Lane			Street Address		
City Harrison	State ME	Zip 04040	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES			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
15,000	\$1.00	PAR VALUE	1,000		\$1.00

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



84654

File Date 3-3-05
Check No. 31776
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 of Officer [Signature] Date 2/24/05
Print or Type Name of Officer Harold Turner Jr.
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. 84654		2. Name of Corporation The H.L. Turner Group Inc.			
3. Street Address Principal Business Office 27 Locke Road			City Concord	State NH	Zip 03301
4. Business Phone No. (603) 228-1122		5. State of Incorporation NEW HAMPSHIRE		6. SIC Code 8888	
7. Brief Description of the Character of Business Conducted in Rhode Island ENGINEERING SERVICES/ CONSULTING FIRM					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Harold Turner Jr.			Vice President Name Fuat Ari		
Street Address 45 Range Road			Street Address 118 Kaime Road		
City Goffstown	State NH	Zip 03045	City Chichester	State NH	Zip 03234
Secretary Name Harold Turner Jr			Treasurer Name Harold Turner Jr.		
Street Address 45 Range Road			Street Address 45 Range Road		
City Goffstown	State NH	Zip 03045	City Goffstown	State NH	Zip 03045
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Loren Belida			Director Name Gerard Blanchette		
Street Address 81 Preston Street			Street Address 168 Seawalls Falls Road		
City Hillsborough	State NH	Zip 03244	City Concord	State NH	Zip 03301
Director Name William A. Turner			Director Name William A. Turner		
Street Address 26 Pinewood Lane			Street Address 26 Pinewood Lane		
City Harrison	State ME	Zip 04040	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
15,000	\$1.00	PAR VALUE	1,000		\$1.00

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



* 8 4 6 5 4 *

File Date 1-26-04
Check No. 30020
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 _____ Date _____

Harold Turner Jr
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. **84654** 2. Name of Corporation **The H.L. Turner Group Inc.**
3. Street Address Principal Business Office **27 Locke Road** City **Concord** State **NH** Zip **03301**
4. Business Phone No. **(603) 228-1122** 5. State of Incorporation **NEW HAMPSHIRE** 6. SIC Code **8888**

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

Engineering Consulting Firm

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

President Name Harold Turner Jr. Street Address 45 Range Road City Goffstown State NH Zip 03045 Secretary Name Harold Turner, Jr. Street Address 45 Range Road City Goffstown State NH Zip 03045	Vice President Name Fuat Ari Street Address 118 Kaime Road City Chichester State NH Zip 03045 Treasurer Name Harold Turner Jr. Street Address 45 Range Road City Goffstown State NH Zip 03045
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Loren Belida Street Address 81 Preston Street City Hillsboro State NH Zip 03244	Director Name Gerard Blanchette Street Address 168 Sewalls Falls Road City Concord State NH Zip 03301
Director Name William A. Turner Street Address 26 Pinewood Lane City Harrison State ME Zip 04040	Director Name Street Address City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
15,000		\$1.00 PAR VALUE

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

ISSUED SHARES	Class/Series	Par Value
1,000		\$1.00

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



* 8 4 6 5 4 *

File Date: 2/24/03
Check No.: 28499
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: 1-27-03
Print or Type Name of Officer: HAROLD TURNER JR

Title of Officer: PRESIDENT



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. **84654** 2. Name of Corporation **The H.L. Turner Group Inc.**
3. Street Address Principal Business Office **27 LOCKE ROAD** City **CONCORD** State **NH** Zip **03301**
4. Business Phone No. **(603)228-1122** 5. State of Incorporation **NEW HAMPSHIRE** 6. SIC Code **8888**
7. Brief Description of the Character of Business Conducted in Rhode Island

Engineering Consulting Firm

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

President Name	Harold Turner	Vice President Name	William Johnson
Street Address	45 Range Road	Street Address	44 Brown Ridge Road
City	Goffstown NH	City	Weare NH
State	NH	State	NH
Zip	03045	Zip	03281
Secretary Name	Harold Turner	Treasurer Name	Harold Turner
Street Address	45 Range Road	Street Address	45 Range Road
City	Goffstown NH	City	Goffstown NH
State	NH	State	NH
Zip	03045	Zip	03045

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

Director Name	Gerard R. Blanchette	Director Name	Loren Belida
Street Address	168 Sewalls Falls Road	Street Address	81 Preston Street
City	Concord NH	City	Hillsboro NH
State	NH	State	NH
Zip	03301	Zip	03244
Director Name	William A. Turner	Director Name	
Street Address	RR #1, Box 535A	Street Address	
City	Harrison ME	City	
State	ME	State	
Zip	04040	Zip	

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
15,000 \$1.00 PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
1,000 \$1.00

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



* 8 4 6 5 4 *

File Date: 3/20/02
Check No.: 24689
By: IB

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: Harold Turner
Title of Officer: President

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **84654** 2. Name of Corporation **The W.C. Turner Group Inc.**

3. Street Address Principal Business Office **27 Locke Rd.** City **Concord** State **NH** Zip **03301**
4. Business Phone No. **603-228-1122** 5. **NEW HAMPSHIRE** 6. **8888**

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

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

President Name Harold Turner	Vice President Name William Johnson
Street Address 45 Range Rd.	Street Address 44 Brown Ridge Rd.
City Goffstown State NH Zip 03045	City Weare State NH Zip 03281
Secretary Name Harold Turner	Treasurer Name Harold Turner
Street Address 45 Range Rd.	Street Address 45 Range Rd.
City Goffstown State NH Zip 03045	City Goffstown State NH Zip 03045

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

Director Name Gerard R. Blanchette,	Director Name Loren M. Belida
Street Address 168 Sewalls Falls Rd.	Street Address 81 Preston St.
City Concord, State NH Zip 03301	City Hillsboro, State NH Zip 03244
Director Name William A. Turner	Director Name
Street Address RR #1, Box 535A	Street Address
City Harrison, State ME Zip 04040	City

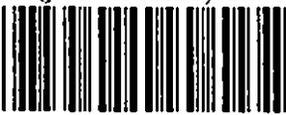
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
15,000		\$1.00

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

ISSUED SHARES	Class/Series	Par Value
1,000		\$1.00

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



* 8 4 6 5 4 *

File Date: 5-10-01
Check No.: 24578
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: 3/7/01
Print or Type Name of Officer: Harold Turner
Title of Officer: President



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. **84654** 2. Name of Corporation **The H.L. Turner Group Inc.**
3. Street Address Principal Business Office **27 Locke Road** City **Concord** State **NH** Zip **03301**
4. Business Phone No. **(603) 228-1122** 5. State of Incorporation **NEW HAMPSHIRE** 6. SIC Code **0000**
7. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name Harold Turner Street Address 45 Range Road City State Zip Goffstown NH 03045 Secretary Name Harold Turner Street Address 45 Range Road City State Zip Goffstown NH 03045	Vice President Name William Johnson, VP Street Address 44 Brown Ridge Road City State Zip Weare NH 03281 Treasurer Name Harold Turner Street Address 45 Range Road City State Zip Goffstown NH 03045
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Gerard R. Blanchette, VP Street Address 168 Sewalls Falls Road City State Zip Concord NH 03301 Director Name William A. Turner, VP Street Address RR #1, Box 535A City State Zip Harrison ME 04040	Director Name Loren M. Belida, VP Street Address 81 Preston Street City State Zip Hillsboro, NH 03244 Street Address City State Zip
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

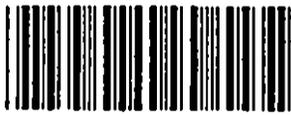
AUTHORIZED SHARES	Class/Series	Par Value
15,000		\$1.00

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

ISSUED SHARES	Class/Series	Par Value
1,000		\$1.00

RECEIVED
JAN 31 12 03 PM '01

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



* 8 4 6 5 4 *

File Date: 1/31/2006
Check No.: 22139
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] 1-14-2006
Signature of Officer Date
Harold Turner
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. 84654		2. Name of Corporation The H.L. Turner Group Inc.	
3. Street Address Principal Business Office 27 Locke Road		City Concord	State NH
4. Business Phone No. 603-228-1122		5. State of Incorporation NEW HAMPSHIRE	6. SIC Code 0000
7. Brief Description of the Character of Business Conducted in Rhode Island Engineering Consulting Firm			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Harold Turner		Vice President Name William Johnson, VP	
Street Address 45 Range Road		Street Address 44 Brown Ridge Road	
City Goffstown	State NH	City Weare	State NH
Zip 03045		Zip 03281	
Secretary Name Harold Turner		Treasurer Name Harold Turner	
Street Address 45 Range Road		Street Address 45 Range Road	
City Goffstown	State NH	City Goffstown	State NH
Zip 03045		Zip 03045	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Gerard R. Blanchette, VP		Director Name Loren M. Belida, VP	
Street Address 168 Sewalls Falls Road		Street Address 81 Preston Street	
City Concord	State NH	City Hillsboro	State NH
Zip 03301		Zip 03244	
Director Name Robert G. Blair, Jr., VP		Director Name William A. Turner, VP	
Street Address PO Box 152		Street Address RR #1, Box 535A	
City Strafford	State NH	City Harrison	State ME
Zip 03884		Zip 04040	
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	Number of Shares	Class/Series
15,000		1,000	
	Par Value		Par Value
	\$1.00		\$1.00

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



* 8 4 6 5 4 *

File Date: 11/21/99
Check No.: 19847
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] 1/21/99
Signature of Officer Date
Harold Turner
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. 84654	2. Name of Corporation The H.L. Turner Group Inc.		
3. Street Address Principal Business Office 6 Loudon Rd	City CONCORD	State N.H.	Zip 03301
4. Business Phone No. 603-228-1122	5. State of Incorporation NEW HAMPSHIRE		6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island			

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

President Name Harold Turner	Vice President Name William Johnson, -VP
Street Address 45 Range Road	Street Address 44 Brown Ridge Road
City Goffstown	City Weare
State NH	State NH
Zip 03045	Zip 03281
Secretary Name Harold Turner	Treasurer Name Harold Turner
Street Address 45 Range Road	Street Address 45 Range Road
City Goffstown	City Goffstown
State NH	State NH
Zip 03045	Zip 03045

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

Director Name Gerard R. Blanchette, -VP	Director Name Loren M. Belida, -VP
Street Address 168 Sewalls Falls Road	Street Address 81 Preston Street
City Concord	City Hillsboro
State NH	State NH
Zip 03301	Zip 03244
Director Name Robert G. Blair, Jr., -VP	Director Name William A. Turner, -VP
Street Address PO Box 152	Street Address RR #1, -Box 535A
City Strefford	City Harrison
State NH	State ME
Zip 03884	Zip 04040

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

AUTHORIZED SHARES	Class/Series	Par Value
15.000		\$1.00

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

ISSUED SHARES	Class/Series	Par Value
1.000		\$1.00

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



* 8 4 6 5 4 *

File Date: **3-16-98**
Check No.: **17001**
By: **ICP**

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] **2/13/98**
Signature of Officer Date
HAROLD TURNER
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. **84654** 2. Name of Corporation **The H.L. Turner Group Inc.**
3. Street Address Principal Business Office **6 Loudon Road** City **Concord** State **NH** Zip **03301**
4. Business Phone No. **(603) 228-1122** 5. State of Incorporation **NEW HAMPSHIRE** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island
ARCHITECTURAL + ENGINEERING + AIR QUALITY COUNSELING -

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)
President Name **Harold Turner** Vice President Name **William Johnson, V.P.**
Street Address **45 Range Road** Street Address **44 Brown Ridge Road**
City **Goffstown** State **NH** Zip **03045** City **Weare** State **NH** Zip **03281**
Secretary Name **Harold Turner** Treasurer Name **Harold Turner**
Street Address **45 Range Road** Street Address **45 Range Road**
City **Goffstown** State **NH** Zip **03045** City **Goffstown** State **NH** Zip **03045**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)
Director Name **Gerard Blanchette, V.P.** Director Name **Loren Belida, V.P.**
Street Address **168 Sewalls Falls Road** Street Address **81 Preston Street**
City **Concord** State **NH** Zip **03301** City **Hillsboro** State **NH** Zip **03244**
Director Name **Robert Blair, Jr., V.P.** Director Name **William Turner, V.P.**
Street Address **PO Box 152** Street Address **RR #1**
City **Strafford** State **NH** Zip **03884** City **Harrison** State **ME** Zip **04040**

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)
AUTHORIZED SHARES
Number of Shares Class/Series Par Value
15,000 **01** **1.000**
ISSUED SHARES
Number of Shares Class/Series Par Value
1,000 **01** **1.000**

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



File Date: 4/9/97
Check No.: 15067
By: GAB

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 3/26/97
Print or Type Name of Officer HAROLD TURNER JR
Title of Officer PRESIDENT, CEO

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. 84654		2. NAME OF CORPORATION The H.L. Turner Group Inc.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 6 LOUDON RD		CITY CONCORD		STATE N.H.	ZIP CODE 03301
4. BUSINESS PHONE NO. (603) 228-1122		5. STATE OF INCORPORATION NEW HAMPSHIRE			6. SIC CODE

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
ENGINEERING, ARCHITECTURAL, CONST. MNG, BUILDING SCIENTISTS

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME SEE ATTACHED FORM			VICE PRESIDENT NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
SECRETARY NAME			TREASURER NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME SAME ABOVE			DIRECTOR NAME SAME ABOVE		
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
15,000-		\$15,000-	1,000-		\$1,000-
		TOTAL			TOTAL

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:

3/18/96
12809
PCT

Check No:

By:

Signature of Officer

HAROLD TURNER JR.

Print or Type Name of Officer

PRESIDENT

Title of Officer

3/19/96

Date

For Secretary of State Use Only

THE H.L. TURNER GROUP, INC.
 LISTING OF OFFICERS *
 a/o 12/31/96

NAME OF OFFICER	TITLE	STREET ADDRESS	CITY	STATE	ZIP CODE
TURNER, JR., HAROLD *	CEO/PRESIDENT	45 RANGE ROAD	GOFFSTOWN	NH	03045
TURNER, WILLIAM A.	VICE--PRESIDENT	RR #1 - BOX 445	NAPLES	ME	04055
MELCHIN, DENNIS	VICE--PRESIDENT	RR #1 - BOX 1397	SALISBURY	NH	03268
BELIDA, LOREN M.	VICE--PRESIDENT	81 PRESTON STREET	HILLSBOROUGH	NH	03244
JOHNSON, WILLIAM C.	VICE--PRESIDENT	44 BROWN RIDGE ROAD	WEARE	NH	03281
BLAIR, ROBERT G.	VICE--PRESIDENT	51 MARSHALL ROAD	KINGSTON	NH	03848
BLANCHETTE, GERARD R.	VICE--PRESIDENT	168 SEWALLS FALLS RD	CONCORD	NH	03301

* NOTE #1: ALL ABOVE OFFICERS ARE SHAREHOLDERS IN FIRM.

* NOTE #2: SERVES AS LONE DIRECTOR, SECRETARY AND TREASURER.

* NOTE #3 - TERMS ARE RENEWED AT ANNUAL MEETING IN APRIL OF EACH YEAR