



## 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 OR PRINTED IN BLACK)

1. Corporate ID No 120465		2. Name of Corporation T.D. FARRELL CONSTRUCTION, INC.			
3. Street Address Principal Business Office 1360 Union Hill Rd. Bldg. 12		City ALPHARETTA	State GA	Zip 30004	
4. Business Phone No. 770-754-3110		5. State of Incorporation GEORGIA		6. SIC Code	
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL BUILDING CONSTRUCTION OF RETAIL BUILDINGS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Tim FARRELL			Vice President Name		
Street Address 1360 Union Hill Rd. Bldg. 12			Street Address		
City ALPHARETTA	State GA	Zip 30004	City	State	Zip
Secretary Name Tim FARRELL			Treasurer Name		
Street Address 1360 Union Hill Rd. Bldg. 12			Street Address		
City ALPHARETTA	State GA	Zip 30004	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Tim FARRELL			Director Name		
Street Address 1360 Union Hill Rd. Bldg. 12			Street Address		
City ALPHARETTA	State GA	Zip 30004	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
10,000 COMM \$0.10 PAR VALUE		0.10	1,000.00	Common	0.10

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



\*120465\*

File Date	2.22.05
Check No.	114571
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.

Signature of Officer

Tim FARRELL

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date

1/26/05



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 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 120465		2. Name of Corporation T.D. FARRELL CONSTRUCTION, INC.		
3. Street Address Principal Business Office 1360 UNION HILL Rd. BLDG. 12		City ALPHARETTA	State GA	Zip 30004
4. Business Phone No. 770-754-3110		5. State of Incorporation GEORGIA		6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL BUILDING CONSTRUCTION OF RETAIL BUILDINGS				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name TIM FARRELL		Vice President Name		
Street Address 1360 UNION HILL Rd. BLDG. 12		Street Address		
City ALPHARETTA	State GA	Zip 30004	City	State
Secretary Name TIM FARRELL		Treasurer Name		
Street Address SAME AS ABOVE		Street Address		
City	State	Zip	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name TIM FARRELL		Director Name		
Street Address 1360 UNION HILL Rd. BLDG. 12		Street Address		
City ALPHARETTA	State GA	Zip 30004	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES				
Number of Shares	Class/Series	Par Value		
10,000 COMM \$0.10 PAR VALUE				
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES				
Number of Shares	Class/Series	Par Value		
1,000	Common	\$0.10		

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



\* 1 2 0 4 6 5 \*

File Date	1-26-04
Check No.	007621
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.

Signature of Officer

TIM FARRELL

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date

1/21/04



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

Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



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. 120465 2. Name of Corporation T.D. FARRELL CONSTRUCTION, INC.

3. Street Address Principal Business Office 1360 Union Hill Rd, BLDG.12 City ALPHARETTA State GA Zip 30004

4. Business Phone No. 770-754-3116 5. State of Incorporation GEORGIA 6. SIC Code 0059

7. Brief Description of the Character of Business Conducted in Rhode Island  
REGISTERED TO DO BUSINESS AS A GENERAL CONTRACTOR - CURRENTLY THERE IS NO BUSINESS ACTIVITY IN RI

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

President Name Tim FARRELL Vice President Name

Street Address 1360 Union Hill Rd, BLDG.12 Street Address  
City ALPHARETTA State GA Zip 30004 City State Zip

Secretary Name Tim FARRELL Treasurer Name

Street Address 1360 Union Hill Rd, BLDG.12 Street Address  
City ALPHARETTA State GA Zip 30004 City State Zip

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

Director Name Tim FARRELL Director Name

Street Address 1360 Union Hill Rd, BLDG.12 Street Address  
City ALPHARETTA State GA Zip 30004 City State Zip

Director Name Director Name

Street Address Street Address  
City State Zip City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

10,000 COMM \$0.10 PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

1,000 COMMON \$0.10

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



\* 1 2 0 4 6 5 \*

File Date: 2/3/03

Check No.: 039308

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 1/28/03

Print or Type Name of Officer TIM FARRELL

Title of Officer PRESIDENT

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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 2002**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>120465</b>		2. Name of Corporation <b>T.D. FARRELL CONSTRUCTION, INC.</b>	
3. Street Address Principal Business Office <b>1360 UNION HILL ROAD, BLDG. 12 ALPHARETTA GA</b>		City <b>ALPHARETTA</b>	State <b>GA</b>
4. Business Phone No. <b>770-754-3110</b>	5. State of Incorporation <b>GEORGIA</b>		6. SIC Code <b>30004</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>COMMERCIAL GENERAL CONTRACTOR - NO WORK IN Rhode ISLAND AT PRESENT</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <b>FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
President Name <b>TIMOTHY D. FARRELL</b>		Vice President Name	
Street Address <b>1360 UNION HILL RD. BUILDING 12</b>		Street Address	
City <b>ALPHARETTA</b>	State <b>GA</b>	City	State
Zip <b>30004</b>		Zip	
Secretary Name <b>TIMOTHY D. FARRELL</b>		Treasurer Name	
Street Address <b>1360 UNION HILL RD. BUILDING 12</b>		Street Address	
City <b>ALPHARETTA</b>	State <b>GA</b>	City	State
Zip <b>30004</b>		Zip	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <b>FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
Director Name <b>SAME</b>		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	
<b>10,000 COMM</b>	<b>\$0.10 PAR VALUE</b>		
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<b>1,000</b>	<b>COMMON</b>	<b>0.10</b>	

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



\* 1 2 0 4 6 5 \*

File Date **4-29-02**

Check No. **333387**

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

Date

**TIM FARRELL**

Print or Type Name of Officer

**PRESIDENT**

Title of Officer

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Form 630 12/01