

**AMENDED OFFICERS ONLY** 222  
**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR '99**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1 Corporate ID No. **82666** 2 Name of Corporation **BRIDAN Corp.**  
3 Street Address Principal Business Office  
**120 BROAD COMMON RD**  
4 Business Phone No. **253-8500** 5 State of Incorporation **RI**

City **Bristol** State **RI** Zip **02809**  
6 SIC Code **0885**

7 Brief Description of the Character of Business Conducted in Rhode Island  
**Bank Loan Repairs / Remodeling**

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

President Name **JOHN DAVID I KEATING**  
Street Address **45 DIXWELL AVE**  
City **CRAWFORD** State **RI** Zip **02910**

Vice President Name **ANDREW T. KEATING**  
Street Address **65 ST ELIZABETH**  
City **Bristol** State **RI** Zip **02809**

Secretary Name **CHRISTOPHER KEATING**  
Street Address **64 FRANCIS LN**  
City **LITTLE CREEPER** State **RI** Zip **02837**

Treasurer Name **JOHN BRIAN KEATING**  
Street Address **12 BROWNELL ST**  
City **WARREN** State **RI** Zip **02885**

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

Director Name  
Street Address  
City State Zip

Director Name  
Street Address  
City State Zip

Director Name  
Street Address  
City State Zip

Director Name  
Street Address  
City State Zip

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value

**100-**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value

**none**

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

File Date: **4-26-99**

Check No. \_\_\_\_\_

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.

Signature of Officer **J B Keating** Date **4-19-99**  
Print or Type Name of Officer **J. B. KEATING**  
Title of Officer **Treasurer**