



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 33191		2. Name of Corporation KIMBERLY ENTERPRISES, INC.			
3. Street Address Principal Business Office 176 Eddie Dowling Highway			City North Smithfield	State RI	Zip 02896
4. Business Phone No. (401)766-1400		5. State of Incorporation RHODE ISLAND			6. SIC Code 34
7. Brief Description of the Character of Business Conducted in Rhode Island CONSTRUCTION AND REAL ESTATE					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Philip F. Godfrin			Vice President Name Kimberly A. Godfrin		
Street Address 47 Homecrest Avenue			Street Address 47 Homecrest Avenue		
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
Secretary Name Philip F. Godfrin			Treasurer Name Kimberly A. Godfrin		
Street Address 47 Homecrest Avenue			Street Address 47 Homecrest Avenue		
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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) <input type="checkbox"/>					
AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
Number of Shares	Class/Series	Par Value	ISSUED SHARES	Number of Shares	Class/Series
5,000 COMM NO PAR VALUE			100	common	no par

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



File Date 1-14-05
Check No. 5673
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
Philip F. Godfrin
President
Date 1-12-05
P#6



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. 33191		2. Name of Corporation KIMBERLY ENTERPRISES, INC.			
3. Street Address Principal Business Office 176 Eddie Dowling Highway			City North Smithfield	State RI	Zip 02896
4. Business Phone No. (401) 766-1400		5. State of Incorporation RHODE ISLAND			6. SIC Code 34
7. Brief Description of the Character of Business Conducted in Rhode Island CONSTRUCTION AND REAL ESTATE					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Philip F. Godfrin			Vice President Name Kimberly A. Godfrin		
Street Address 47 Homecrest Avenue			Street Address 47 Homecrest Avenue		
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
Secretary Name Philip F. Godfrin			Treasurer Name Kimberly A. Godfrin		
Street Address 47 Homecrest Avenue			Street Address 47 Homecrest Avenue		
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
5,000 COMM NO PAR VALUE			100	common	no par
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

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



* 3 3 1 9 1 *

File Date 1-16-04
Check No. 5038
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] 1-14-04
Signature of Officer Philip F. Godfrin Date
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. **33191** 2. Name of Corporation **KIMBERLY ENTERPRISES, INC.**
3. Street Address Principal Business Office **176 Eddie Dowling Highway** City **North Smithfield** State **RI** Zip **02896**
4. Business Phone No. **(401) 766-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**
7. Brief Description of the Character of Business Conducted in Rhode Island **Construction and Real Estate**

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

President Name Philip F. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896	Vice President Name Kimberly A. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896
Secretary Name Philip F. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896	Treasurer Name Kimberly A. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896

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

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
5,000 COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)
ISSUED SHARES
Number of Shares Class/Series Par Value
100 common no par

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



File Date: 1-15-03
Check No.: 4549
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: 1-13-03
Print or Type Name of Officer: Philip F Godfrin
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. **33191** 2. Name of Corporation **KIMBERLY ENTERPRISES, INC.**
3. Street Address Principal Business Office **176 Eddie Dowling Highway** City **North Smithfield** State **RI** Zip **02896**
4. Business Phone No. **401-766-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**
7. Brief Description of the Character of Business Conducted in Rhode Island
Construction and Real Estate

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

President Name Philip F. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896	Vice President Name Kimberly A. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896
Secretary Name Philip F. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896	Treasurer Name Kimberly A. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896

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

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
5,000 COMM NO PAR VALUE

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

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

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



* 3 3 1 9 1 *

2-1-02

File Date: _____

Check No.: **4133**

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] 1-30-02
Signature of Officer Date

Philip F. Godfrin
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. **33191** 2. Name of Corporation **KIMBERLY ENTERPRISES, INC.**

3. Street Address Principal Business Office
176 Eddie Dowling Highway City **North Smithfield** State **RI** Zip **02896**
4. Business Phone No. **401-766-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**

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

Construction and Real Estate

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

President Name Philip F. Godfrin	Vice President Name Kimberly A. Godfrin
Street Address 47 Homecrest Avenue	Street Address 47 Homecrest Avenue
City State Zip North Smithfield RI 02896	City State Zip North Smithfield RI 02896
Secretary Name Philip F. Godfrin	Treasurer Name Kimberly A. Godfrin
Street Address 47 Homecrest Avenue	Street Address 47 Homecrest Avenue
City State Zip North Smithfield RI 02896	City State Zip North Smithfield RI 02896

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
Number of Shares Class/Series Par Value
5,000 NO PAR COM

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 COMMON no par

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



* 3 3 1 9 1 *

File Date: 5-22-01
Check No.: 3844
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 5-18-01
Signature of Officer
Philip F. Godfrin
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. **33191** 2. Name of Corporation **KIMBERLY ENTERPRISES, INC.**
 3. Street Address Principal Business Office **176 Eddie Dowling Highway** City **North Smithfield** State **RI** Zip **02896**
 4. Business Phone No. **(401)766-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **34**
 7. Brief Description of the Character of Business Conducted in Rhode Island
Construction and Real Estate

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

President Name Philip F. Godfrin	Vice President Name Kimberly A. Godfrin
Street Address 47 Homecrest Avenue	Street Address 47 Homecrest Avenue
City North Smithfield State RI Zip 02896	City North Smithfield State RI Zip 02896
Secretary Name Kimberly A. Godfrin	Treasurer Name Philip F. Godfrin
Street Address 47 Homecrest Avenue	Street Address 47 Homecrest Avenue
City North Smithfield State RI Zip 02896	City North Smithfield State RI Zip 02896

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	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
5,000	NO PAR COM	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	COMMON	no par

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



* 3 3 1 9 1 *

File Date: 3/7/00
 Check No.: 3298
 By: lc

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.

Philip F. Godfrin 3-1-00
 Signature of Officer Date
Philip F. Godfrin
 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. 33191		2. Name of Corporation KIMBERLY ENTERPRISES, INC.	
3. Street Address Principal Business Office 176 Eddie Dowling Highway		City North Smithfield	State RI
		Zip 02896	
4. Business Phone No. (401)766-1400		5. State of Incorporation RHODE ISLAND	
6. SIC Code 34			
7. Brief Description of the Character of Business Conducted in Rhode Island General Construction and Real Estate Development			

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Philip F. Godfrin		Vice President Name Louis D. Berthod	
Street Address 47 Homecrest Avenue		Street Address 11 Waterfront Lane	
City North Smithfield	State RI	City Burrillville	State RI
Zip 02896		Zip 02826	
Secretary Name Scott K. Keefer		Treasurer Name Louis D. Berthod	
Street Address 18 Edward Avenue		Street Address 11 Waterfront Lane	
City North Smithfield	State RI	City Burrillville	State RI
Zip 02896		Zip 02826	

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Kimberly Godfrin		Director Name Nancy Berthod	
Street Address 47 Homecrest Avenue		Street Address 11 Waterfront Lane	
City North Smithfield	State RI	City Burrillville	State RI
Zip 02896		Zip 02826	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	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 NO PAR COM			100	common	no par

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



* 3 3 1 9 1 *

File Date: 1.5.99
Check No.: 2739
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] 1-4-99
Signature of Officer Date
Philip F. Godfrin
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. **33191** 2. Name of Corporation **KIMBERLY ENTERPRISES, INC.**
3. Street Address Principal Business Office **176 Eddie Dowling Highway** City **North Smithfield** State **RI** Zip **02896**
4. Business Phone No. **(401) 766-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0034**
7. Brief Description of the Character of Business Conducted in Rhode Island
General Construction and Real Estate Development

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

President Name Philip F. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896	Vice President Name Louis D. Berthod Street Address 11 Waterfront Lane City Glendale State RI Zip 02826
Secretary Name Scott K. Keefer Street Address 18 Edward Avenue City North Smithfield State RI Zip 02896	Treasurer Name Louis D. Berthod Street Address 11 Waterfront Lane City Glendale State RI Zip 02826

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

Director Name Kimberly Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896	Director Name Nancy Berthod Street Address 11 Waterfront Lane City Glendale State RI Zip 02826
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
5,000 NO PAR COM

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

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

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



File Date: 11/98
Check No.: 2369
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 12-18-97
Print or Type Name of Officer **Philip F. Godfrin**
Title of Officer **President**

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. **33191** 2. Name of Corporation **KIMBERLY ENTERPRISES, INC.**
3. Street Address Principal Business Office **176 Eddie Dowling Highway** City **North Smithfield** State **RI** Zip **02896**
4. Business Phone No. **(401) 766-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0034**
7. Brief Description of the Character of Business Conducted in Rhode Island
General Construction and Real Estate Development

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

President Name Philip F. Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896 Secretary Name Scott K. Keefer Street Address 18 Edward Avenue City North Smithfield State RI Zip 02896	Vice President Name Louis D. Berthod Street Address 650 Providence Pike City North Smithfield State RI Zip 02896 Treasurer Name Louis D. Berthod Street Address 650 Providence Pike City North Smithfield State RI Zip 02896
---	---

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

Director Name Kimberly Godfrin Street Address 47 Homecrest Avenue City North Smithfield State RI Zip 02896	Director Name Nancy Berthod Street Address 650 Providence Pike City North Smithfield State RI Zip 02896
---	--

10. SHARES AUTHORIZED AND 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	NO PAR COM		100	common	

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



File Date: 1/1/97
Check No.: 2029
By: (CS)

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.

Philip F. Godfrin 12-30-96
Signature of Officer Date
Philip F. Godfrin
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. 33191
2. NAME OF CORPORATION KIMBERLY ENTERPRISES, INC.
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE
176 Eddie Dowling Highway North Smithfield RI 02896
4. BUSINESS PHONE NO. (401) 766-1400
5. STATE OF INCORPORATION RHODE ISLAND
6. SIC CODE 0034
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
General Construction and Real Estate Development

8. NAMES AND ADDRESSES OF THE OFFICERS
PRESIDENT NAME Philip F. Godfrin VICE PRESIDENT NAME Louis D. Berthod
STREET ADDRESS 47 Homecrest Avenue STREET ADDRESS 650 Providence Pike
CITY STATE ZIP CODE North Smithfield RI 02896 CITY STATE ZIP CODE North Smithfield RI 02896
SECRETARY NAME Scott K. Keefer TREASURER NAME Louis D. Berthod
STREET ADDRESS 18 Edward Avenue STREET ADDRESS 650 Providence Pike
CITY STATE ZIP CODE North Smithfield RI 02896 CITY STATE ZIP CODE North Smithfield RI 02896

9. NAMES AND ADDRESSES OF THE DIRECTORS
DIRECTOR NAME Kimberly Godfrin DIRECTOR NAME Nancy Berthod
STREET ADDRESS 47 Homecrest Avenue STREET ADDRESS 650 Providence Pike
CITY STATE ZIP CODE North Smithfield RI 02896 CITY STATE ZIP CODE North Smithfield RI 02896

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
5,000	NO PAR COM		100	Common	

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.

Signature of Officer: *Philip F. Godfrin*
Philip F. Godfrin
Print or Type Name of Officer
President
Title of Officer

11-27-95
Date

File Date: 1/1/96
Check No: 1785
By: [Signature]

For Secretary of State Use Only



Office of The Secretary of State
 100 North Main Street
 Providence, Rhode Island 02903-1335
 401-277-3040

FILED

JAN 04 1995

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.

Corporate ID: _____

Annual Report for the year: 1995

KIMBERLY ENTERPRISES, INC.

Name of Corporation: _____

Business entity organized under the laws of the State of: RI

Business Entity is (check one):

Business Corporation (See RIGL Chapter 7-1.1)

Professional Service Corporation (See RIGL Chapter 7-5.1)

For foreign entity, address and telephone number of principal office: _____

Brief statement of the character of business conducted in Rhode Island:

General Construction and Real

Estate Development

Phone: () _____

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

176 Eddie Dowling Highway

North Smithfield, RI 02896

Phone: (401) 766-1400

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT Philip F. Godfrin	47 Homecrest Ave., North Smithfield, RI	RI	02896
VICE PRESIDENT Louis D. Berthod	650 Providence Pike, North Smithfield, RI	RI	02896
SECRETARY Scott K. Keefer	18 Edward Ave., North Smithfield, RI	RI	02896
TREASURER Louis D. Berthod	650 Providence Pike, North Smithfield, RI	RI	02896

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Kimberly Godfrin	47 Homecrest Ave., North Smithfield, RI	RI	02896
Nancy L. Berthod	650 Providence Pike, North Smithfield, RI	RI	02896

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
5,000	Common

Number of Shares	Class / Series
100	Common

Date January 3, 1994

By:
 Philip F. Godfrin
 PRINT OR TYPE NAME OF OFFICER SIGNING
 President
 TITLE OF OFFICER SIGNING

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.

PHILIP F. GODFRIN
 176 EDDIE DOWLING HIGHWAY
 NO. SMITHFIELD RI 02896

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
L.L.C. Sept. 1 - Nov. 1
CORP. Jan. 1 - March 1

Corporate ID 0033191 Annual Report for the year 1994

Name of Business Entity: KIMBERLY ENTERPRISES, INC.

Business entity organized under the laws of the State of RI

Business Entity is (check one)

Federal Taxpayer Identification Number: [REDACTED]

- Business Corporation (See RIGL Chapter 7-1-1)
- Professional Service Corporation (See RIGL Chapter 7-5-1)
- Limited Liability Company (See RIGL 7-16)

For foreign entity, address and telephone number of principal office

Name, title and mailing address of contact person to whom communications may be directed.

Philip F. Godfrin, President

47 Homecrest Avenue

North Smithfield, RI 02896

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - No. P.O. Box):

176 Eddie Dowling Highway

North Smithfield, RI 02896

Best statement of the character of business conducted in Rhode Island:

General Construction and Real Estate Development.

Date of Organization: 02/04/85

Phone: (401) 766-1400

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

THE NAMES OF THE OFFICERS ARE:

OFFICE	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> PRESIDENT (See RIGL 7-1-1)	Philip F. Godfrin	47 Homecrest Avenue, North Smithfield, RI	02896	
<input checked="" type="checkbox"/> VICE PRESIDENT (See RIGL 7-1-1)	Louis D. Berthod	650 Providence Pike, North Smithfield, RI	02896	
<input checked="" type="checkbox"/> SECRETARY (See RIGL 7-1-1)	Scott K. Koefer	18 Edward Avenue, North Smithfield, RI	02896	
<input checked="" type="checkbox"/> TREASURER (See RIGL 7-1-1)	Louis D. Berthod	650 Providence Pike, North Smithfield, RI	02896	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Kimberly Godfrin	47 Homecrest Avenue, North Smithfield, RI	02896	
Nancy L. Berthod	650 Providence Pike, North Smithfield, RI	02896	

NUMBER OF SHARES AUTHORIZED (if Applicable)

NUMBER 5,000

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR Without Par

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR Without Par

FILED
FEB 9 1994
By [Signature]

Date January 24, 19 94

[Signature]
Philip F. Godfrin

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

FORM 9-1994

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 L.L.C. 3 must be filed

PHILIP F. GODFRIN
176 EDDIE DOWLING HIGHWAY
NO. SMITHFIELD RI 02896

Filing Fee \$50.00

12639/B

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 33191

Annual Report for the year 1993

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general construction and real estate
development business

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 176 Eddie Dowling Highway
North Smithfield, RI 02896

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

Name	Office	Address (including number, street, zip code)
Kimberly Godfrin	Director	47 Homecrest Avenue, No. Smithfield, RI 02896
Nancy L. Berthod	Director	650 Providence Pike, No. Smithfield, RI 02896
	Director	
Philip F. Godfrin	President	47 Homecrest Avenue, No. Smithfield, RI 02896
Louis D. Berthod	Vice President	650 Providence Pike, No. Smithfield, RI 02896
Scott K. Keefer	Secretary	18 Edward Ave., No. Smithfield, RI 02876
Louis D. Berthod	Treasurer	650 Providence Pike, No. Smithfield, RI 02896

SEVENTH: Number of Shares authorized:

No of Shares	Class	Series
5,000	common	

Par Value
or statement that
shares are without
par value

No Par

EIGHTH: Number of Shares issued:

No of Shares	Class	Series
100	common	

Par Value
or statement that
shares are without
par value

No Par

Dated November 12, 1993

KIMBERLY ENTERPRISES, INC.
(Name of Corporation)

By Philip F. Godfrin

President

PAID
NOV 12 1993
CITY OF RI

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 33191 Annual Report for the year 1992

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general construction and real estate development business

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 176 Eddie Dowling Highway
North Smithfield, Rhode Island 02895

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

Name	Office	Address (including number, street, zip code)
Kimberly Godfrin	Director	47 Homecrest Avenue, No. Smithfield, RI 02895
Nancy L. Berthod	Director	550 Providence Pike, No. Smithfield, RI 02895
	Director	
Philip F. Godfrin	President	47 Homecrest Avenue, No. Smithfield, RI 02895
Louis D. Berthod	Vice President	550 Providence Pike, No. Smithfield, RI 02895
Scott K. Keefer	Secretary	18 Edward Avenue, No. Smithfield, RI 02876
Louis D. Berthod	Treasurer	550 Providence Pike, No. Smithfield, RI 02895

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000	Common		No Par

Rec'd & Filed JAN 06 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

AMER 29
92735

Dated December 31 19 92

KIMBERLY ENTERPRISES, INC.
(Name of Corporation)

By Philip F. Godfrin
Title President

(Report must be signed by an officer)

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 33191 Annual Report for the year 1991

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general construction and real estate development business

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 176 Eddie Dowling Highway
North Smithfield, Rhode Island 02895

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

Name	Office	Address (including number, street, zip code)
Kimberly Godfrin	Director	47 Homecrest Avenue, No. Smithfield, RI 02895
Nancy L. Berthod	Director	550 Providence Pike, No. Smithfield, RI 02895
	Director	
Philip F. Godfrin	President	47 Homecrest Avenue, No. Smithfield, RI 02895
Louis D. Berthod	Vice President	550 Providence Pike, No. Smithfield, RI 02895
Scott K. Keefer	Secretary	13 Edward Avenue, No. Smithfield, RI 02876
Louis D. Berthod	Treasurer	550 Providence Pike, No. Smithfield, RI 02895

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000	Common		No Par

EIGHTH: Number of Shares issued:

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

Dated December 31 19 92

KIMBERLY ENTERPRISES, INC.
(Name of Corporation)

By Philip F. Godfrin
Title President

(Report must be signed by an officer)

JAN 06 1993
Series
AMT#29
92730

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 33191 Annual Report for the year 1990

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general construction and real estate development business

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

FIFTH: Business address in Rhode Island 176 Eddie Dowling Highway
North Smithfield, Rhode Island 02895

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

Name	Office	Address (including number, street, zip code)
Kimberly Godfrin	Director	47 Homecrest Avenue, No. Smithfield, RI 02895
Nancy L. Berthod	Director	550 Providence Pike, No. Smithfield, RI 02895
	Director	
Philip F. Godfrin	President	47 Homecrest Avenue, No. Smithfield, RI 02895
Louis D. Berthod	Vice President	550 Providence Pike, No. Smithfield, RI 02895
Scott K. Keefer	Secretary	13 Edward Avenue, No. Smithfield, RI 02876
Louis D. Berthod	Treasurer	550 Providence Pike, No. Smithfield, RI 02895

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000	Common		No Par

EIGHTH: Number of Shares issued:

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

Rec'd & Filed JAN 06 1991

Dated December 31 19 92

KIMBERLY ENTERPRISES, INC.
(Name of Corporation)

By Philip F. Godfrin

Title 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
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0068191

Annual Report for the year 1989

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General construction and real estate develop-
ment and any other lawful business

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 176 Eddie Dowling Highway
North Smithfield, RI 02895

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

Name	Office	Address (including number, street, zip code)
Philip F. Godfrin	Director	47 Homecrest Ave., North Smithfield, RI 02895
Louis D. Berthod	Director	550 Providence Pike, North Smithfield, RI 01895
	Director	
Philip F. Godfrin	President	47 Homecrest Ave., North Smithfield, RI 02895
Louis D. Berthod	Vice President	550 Providence Pike, North Smithfield, RI 02895
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares 5,000 Class Common

PAID

FEB 7 1989 Series

Par Value
or statement that
shares are without
par value
No Par

SEC'Y OF STATE

EIGHTH: Number of Shares issued:

No. of Shares 5,000 Class Common Series

Par Value
or statement that
shares are without
par value
No Par

Dated January 19 89

Kimberly Enterprises, Inc.
(Name of Corporation)

By Philip F. Godfrin

Title 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 33191 Annual Report for the year 1988

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General construction and real estate development and any other lawful business.

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

FIFTH: Business address in Rhode Island 56 Crawford Street
Woonsocket, RI 02895

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

Name	Office	Address (including number, street, zip code)
Philip F. Godfrin	Director	P. O. Box 29, Glendale, RI 02826
Louis D. Berthod	Director	550 Providence Pike, North Smithfield, RI 02895
	Director	
Philip F. Godfrin	President	P. O. Box 29, Glendale, RI 02826
Louis D. Berthod	Vice President	550 Providence Pike, North Smithfield, RI 02895
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000	Common		No Par

01/15/88 PAID

JAN 21 1988

Dated January 19 88 Kimberly Enterprises, Inc.
(Name of Corporation)

ANRE 15.00
CHEK 15.00
0067A001

By Philip F. Godfrin
Title 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 33191 Annual Report for the year 1987

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Construction and Real Estate
Development and any and all other lawful business.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 56 Crawford Street, Woonsocket, RI 02895

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

Name	Office	Address (including number, street, zip code)
Philip F. Godfrin	Director	P.O. Box 29, Glendale, RI 02826
Louis D. Berthod	Director	550 Providence Pike, North Smithfield, RI 02895
	Director	
Philip F. Godfrin	President	
Louis D. Berthod	Vice President	
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5000	Common	PAID	No Par

JAN 14 1987

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5000	Common		No Par

SECY OF STATE

Dated January 9, 1987
JAN 14 ENT'D

Kimberly Enterprises, Inc.
(Name of Corporation)
By Philip F. Godfrin
Title 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 33191 Annual Report for the year 1986

FIRST: The name of the corporation is KIMBERLY ENTERPRISES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Construction and Real Estate Development
and any and all other lawful business.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 56 Crawford Street, Woonsocket, RI 02895

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

Name	Office	Address (including number, street, zip code)
Philip F. Godfrin	Director	Northwood Lane, Slatersville, RI 02876
Louis D. Berthod	Director	550 Providence Pike, North Smithfield, RI 02895
	Director	
Philip F. Godfrin	President	
Louis D. Berthod	Vice President	
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5000	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5000	Common		No Par

Dated January 21 19 86
Kimberly Enterprises, Inc.
(Name of Corporation)

FEB 22 1986

(Report must be signed by an officer)

By Philip F. Godfrin
Title President