



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. 82998		2. Name of Corporation Bristol Harbor Group, Inc.			
3. Street Address Principal Business Office 103 Poppa Squash Rd.		City Bristol	State RI	Zip 02809	
4. Business Phone No 401.253.4318		5. State of Incorporation RHODE ISLAND		6. SIC Code 7518	
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE A NAVAL DESIGN SERVICES INCLUDING THE DESIGN OF PRODUCTS TO BE USED IN THE MARINE ENVIRONMENT AND INDUSTRY.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gregory W. Beers			Vice President Name Cory C. Wood		
Street Address 23 Beaver Rd.			Street Address 52 Constitution St.		
City Barrington	State RI	Zip 02806	City Bristol	State RI	Zip 02809
Secretary Name Andrew Tyska			Treasurer Name Cory C. Wood		
Street Address 43 Monterey Dr.			Street Address 52 Constitution St.		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Gregory W. Beers			Director Name Cory C. Wood		
Street Address 23 Beaver Rd.			Street Address 52 Constitution St.		
City Barrington	State RI	Zip 02806	City Bristol	State RI	Zip 02809
Director Name Andrew Tyska			Director Name		
Street Address 43 Monterey Dr.			Street Address		
City Bristol	State RI	Zip 02809	City	State	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
4,000 COMM. NO. PAR. VALUE			180	Common	NO PAR

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

Date

Gregory W. Beers

Print or Type Name of Officer

President

Title of Officer

File Date

1-21-05

Check No.

2324

By:

FOR SECRETARY OF STATE USE ONLY



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. 82998		2. Name of Corporation Bristol Harbor Group, Inc.		
3. Street Address Principal Business Office 103 POPPASQUASH ROAD		City BRISTOL	State RI	Zip 02809
4. Business Phone No 401.253.4318		5. State of Incorporation RHODE ISLAND		6. SIC Code 7518
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE A NAVAL DESIGN SERVICES INCLUDING THE DESIGN OF PRODUCTS TO BE USED IN THE MARINE ENVIRONMENT AND INDUSTRY.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name GREGORY W. BEERS		Vice President Name CORY C. WOOD		
Street Address 23 BEAVER ROAD		Street Address 52 CONSTITUTION STREET		
City BARRINGTON	State RI	Zip 02806	City BRISTOL	State RI
Secretary Name ANDREW TRYKA		Treasurer Name CORY C. WOOD		
Street Address 72 KING PHILLIP		Street Address 52 CONSTITUTION STREET		
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name GREGORY W. BEERS		Director Name CORY C. WOOD		
Street Address 23 BEAVER ROAD		Street Address 52 CONSTITUTION STREET		
City BARRINGTON	State RI	Zip 02806	City BRISTOL	State RI
Director Name ANDREW TRYKA		Director Name		
Street Address 72 KING PHILLIP		Street Address		
City BRISTOL	State RI	Zip 02809	City	State
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
4,000 COMM NO PAR VALUE			180	Common
				No PAR

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



* 8 2 9 9 8 *

File Date 4/13/04
Check No. 2205
By: U.

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

GREGORY W. BEERS

Print or Type Name of Officer

PRESIDENT

Title of Officer

20 FEB 04
Date

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. **82998**
2. Name of Corporation **Bristol Harbor Group, Inc.**
3. Street Address Principal Business Office
103 POPPASQUASH ROAD
4. Business Phone No. **401-253-4318** 5. State of Incorporation **RHODE ISLAND**

City **BRISTOL** State **RI** Zip **02809**
6. SIC Code **7518**

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

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

President Name
Gregory W. Beers
Street Address
23 Beaver Road
City **Barrington** State **RI** Zip **02806**

Vice President Name
CORY WOOD
Street Address
52 CONSTITUTION STREET
City **BRISTOL** State **RI** Zip **02809**

Secretary Name
Andrew Tyska
Street Address
72 KING PHILLIP
City **BRISTOL** State **RI** Zip **02809**

Treasurer Name
CORY WOOD
Street Address
52 CONSTITUTION STREET
City **BRISTOL** State **RI** Zip **02809**

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

Director Name
Gregory W. Beers
Street Address
23 Beaver Road
City **Barrington** State **RI** Zip **02806**

Director Name
CORY WOOD
Street Address
52 CONSTITUTION STREET
City **BRISTOL** State **RI** Zip **02809**

Director Name
Andrew Tyska
Street Address
72 KING PHILLIP
City **BRISTOL** State **RI** Zip **02809**

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
4,000 COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
180 Common NO Par

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



* 8 2 9 9 8 *

FILED

File Date: **JAN 29 2003**

Check No.: **BV 0011828**

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 **Gregory W. Beers** Date **1/27/03**

Print or Type Name of Officer **Gregory W. Beers**

Title of Officer **President**



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. **82998**
2. Name of Corporation **Bristol Harbor Group, Inc.**
3. Street Address Principal Business Office
103 POPPASQUASH RD
4. Business Phone No. **401-253-4318**
5. State of Incorporation **RHODE ISLAND**

City **BRISTOL** State **RI** Zip **02809**
6. SIC Code **7518**

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

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

President Name **GREGORY W. BEERS**

Vice President Name **CORY WOOD**

Street Address **38 RIDGE ST**
City **PROVIDENCE** State **RI** Zip **02860**

Street Address **52 CONSTITUTION ST**
City **BRISTOL** State **RI** Zip **02809**

Secretary Name **ANDREW TYSKA**

Treasurer Name **N/A**

Street Address **72 KING PHILLIP**
City **BRISTOL** State **RI** Zip **02809**

Street Address
City State Zip

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

Director Name **N/A**

Director Name **N/A**

Street Address
City State Zip

Street Address
City State Zip

Director Name **N/A**

Director Name **N/A**

Street Address
City State Zip

Street Address
City State Zip

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
4,000	COMM	NO PAR VALUE

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
180	Common	No Par

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



* 8 2 9 9 8 *

File Date: **1-8-02**

Check No.: **1444**

By: **re**

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 **GREG W. BEERS** Date **01/14/02**

Print or Type Name of Officer **GREG W. BEERS**

Title of Officer **PRESIDENT**



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 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **82998** 2. Name of Corporation **~~FG MARINE DESIGN, INC.~~ BRISTOL HARBOR GROUP INC**
3. Street Address Principal Business Office **103 POPPASQUASH RD** City **BRISTOL** State **RI** Zip **02809**
4. Business Phone No. **401 253 4318** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7518**

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

MARINE DESIGN OFFICE

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

President Name **GREGORY W. BEERS** Vice President Name **CORY WOOD**
Street Address **38 RIDGE ST** Street Address **52 CONSTITUTION ST**
City **PROVIDENCE** State **RI** Zip **02860** City **BRISTOL** State **RI** Zip **02809**
Secretary Name **ANDREW TYSKA** Treasurer Name **N/A**
Street Address **72 KING PHILIP** Street Address **N/A**
City **BRISTOL** State **RI** Zip **02809** City **N/A** State **N/A** Zip **N/A**

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

Director Name **N/A** Director Name **N/A**
Street Address **N/A** Street Address **N/A**
City **N/A** State **N/A** Zip **N/A** City **N/A** State **N/A** Zip **N/A**
Director Name **N/A** Director Name **N/A**
Street Address **N/A** Street Address **N/A**
City **N/A** State **N/A** Zip **N/A** City **N/A** State **N/A** Zip **N/A**

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
4,000 SHS	COMM	NO PAR VAL

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
180	COMMON	NO PAR

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



* 8 2 9 9 8 *

FILED

File Date: **FEB 26 2001**

Check No.: **37-100 1028**

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.

Cory Wood **2-23-01**
Signature of Officer Date

CORY WOOD
Print or Type Name of Officer

VICE PRESIDENT
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

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. 82998 2. Name of Corporation FG MARINE DESIGN, INC.

3. Street Address Principal Business Office

103 POPPASQUASH RD

City BRISTOL

State RI

Zip 02809

4. Business Phone No.

401.253.4318

5. State of Incorporation
RHODE ISLAND

6. SIC Code
7518

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

MARINE DESIGN

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

President Name

GREG BEERS

Vice President Name

CORY WOOD

Street Address

38 RIDGE ST

Street Address

52 CONSTITUTION ST

City State Zip

PAWTUCKET RI 02860

City

BRISTOL

State

RI

Zip
02809

Secretary Name

ANDY TYSKA

Treasurer Name

CORY WOOD

Street Address

72 KING PHILLIP AVE

Street Address

City State Zip

BRISTOL RI 02809

City

State

Zip

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

Director Name

N.A.

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

4,000 SHS COMM NO PAR VAL

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

ISSUED SHARES

Number of Shares Class/Series Par Value

180 COMM NO PAR

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



* 8 2 9 9 8 *

File Date: 3/2/00

Check No.: 1091

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.

Cory Wood 2-27-00
Signature of Officer Date

CORY WOOD
Print or Type Name of Officer

VICE PRESIDENT
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. 82998		2. Name of Corporation FG MARINE DESIGN, INC.	
3. Street Address Principal Business Office 103 POPPASQUASH RD		City BRISTOL	State RI
4. Business Phone No. 401 253 4318		5. State of Incorporation RHODE ISLAND	
6. SIC Code 7518			
7. Brief Description of the Character of Business Conducted in Rhode Island MARINE DESIGN			

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name GREY BEERS		Vice President Name CORY WOOD	
Street Address 38 RIDGE ST		Street Address 17 BURNSIDE ST	
City PAWTUCKET	State RI	City BRISTOL	State RI
Zip 02860		Zip 02809	
Secretary Name ANDREW TYSKA		Treasurer Name CORY WOOD	
Street Address 17 BURNSIDE ST		Street Address	
City BRISTOL	State RI	City	State
Zip 02809		Zip	

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name NONE		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)			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
4,000 SHS COMM NO PAR VAL			180	N/A	\$0

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



* 8 2 9 9 8 *

File Date **PAID**
FEB 24 1999
Check No. **110**
By: **1413** **SECY OF STATE**
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.

Cory Wood **2/22/99**
Signature of Officer Date
CORY WOOD
Print or Type Name of Officer
VICE PRESIDENT
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

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. **82998** 2. Name of Corporation **FG MARINE DESIGN, INC.**

3. Street Address Principal Business Office

18 BURNSIDE STREET

City **BRISTOL**

State **RI**

Zip **02809**

4. Business Phone No.

401 253 4318

5. State of Incorporation
RHODE ISLAND

6. SIC Code
7518

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

MARINE DESIGN OFFICE

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

President Name

GREG BEERS

Street Address

167 PIERCE ST

City **E. GREENWICH** State **RI** Zip **02818**

Secretary Name

ANDREW TYSKA

Street Address

17 BURNSIDE ST

City **BRISTOL** State **RI** Zip **02809**

Vice President Name

JAMES CRINER

Street Address

17 BURNSIDE ST

City **BRISTOL** State **RI** Zip **02809**

Treasurer Name

CORY WOOD

Street Address

17 BURNSIDE ST

City **BRISTOL** State **RI** Zip **02809**

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

Director Name

NONE

Street Address

City State Zip

Director Name

NONE

Street Address

City State Zip

Director Name

NONE

Street Address

City State Zip

Director Name

NONE

Street Address

City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

4,000 SHS COMM NO PAR VAL

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

ISSUED SHARES

Number of Shares Class/Series Par Value

240

COMMON

\$100

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



* 8 2 9 9 8 *

File Date: **5-1-98**

Check No.: **1263**

By: **AMK**

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 **Cory Wood** Date **4/30/98**

Print or Type Name of Officer **CORY WOOD**

Title of Officer **TREASURER**



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

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. **82998** 2. Name of Corporation **FG MARINE DESIGN, INC.**

3. Street Address Principal Business Office **18 BURNSIDE STREET** City **BRISTOL** State **RI** Zip **02809**
4. Business Phone No. **401 253 4318** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7518**

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

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

President Name GREG BEERS Street Address 167 PEIRCE ST City EAST GREENWICH State RI Zip 02818 Secretary Name ANDY TYSKA Street Address 17 BURNSIDE ST City BRISTOL State RI Zip 02809	Vice President Name JAMES CRINER Street Address 17 BURNSIDE ST City BRISTOL State RI Zip 02809 Treasurer Name CORY WOOD Street Address 17 BURNSIDE ST City BRISTOL State RI Zip 02809
--	--

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

Director Name NONE Street Address - City - State - Zip -	Director Name NONE Street Address - City - State - Zip -
Director Name NONE Street Address - City - State - Zip -	Director Name NONE Street Address - City - State - Zip -

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

AUTHORIZED SHARES	ISSUED SHARES
Number of Shares	Number of Shares
Class/Series	Class/Series
Par Value	Par Value
4,000 SHS COMM NO PAR VAL	220 COMMON NO PAR VAL

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



File Date: **3/6/97**
Check No.: **1080**
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.

Cory Wood **2-24-97**
Signature of Officer Date
CORY WOOD
Print or Type Name of Officer
TREASURER
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 82998		2. NAME OF CORPORATION FG MARINE DESIGN, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 18 BURNSIDE STREET		CITY BRISTOL	STATE RI
		ZIP CODE 02809	
4. BUSINESS PHONE NO. (401) 253-4318		5. STATE OF INCORPORATION RHODE ISLAND	
		6. SIC CODE 7518	

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
ENGINEERING FOR THE MARINE ENVIRONMENT

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME GREGORY W. BEERS		VICE PRESIDENT NAME JAMES M. CRIVER	
STREET ADDRESS 17 BURNSIDE STREET		STREET ADDRESS 17 BURNSIDE STREET	
CITY BRISTOL	STATE RI	CITY BRISTOL	STATE RI
SECRETARY NAME ANDREW T. TYSKA		TREASURER NAME CORY C. WOOD	
STREET ADDRESS 17 BURNSIDE STREET		STREET ADDRESS 17 BURNSIDE STREET	
CITY BRISTOL	STATE RI	CITY BRISTOL	STATE RI

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME "NONE"		DIRECTOR NAME "NONE"	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
DIRECTOR NAME "NONE"		DIRECTOR NAME "NONE"	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE

10. SHARES AUTHORIZED AND ISSUED				
AUTHORIZED SHARES			ISSUED SHARES	
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	PAR VALUE
4,000 SHS COMM NO PAR VAL			20	COMM No PAR

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: 1-12-96
Check No: 1021
By: [Signature]
For Secretary of State Use Only

Signature of Officer
GREGORY W. BEERS
Print or Type Name of Officer
PRESIDENT
Date: 1/10/96