

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813554

Entity Name: GILBANE, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

7 JACKSON WALKWAY  
P.O. BOX 6128  
PROVIDENCE, RI 02940

## New Principal Place of Business:

7 JACKSON WALKWAY  
PROVIDENCE, RI 02903

## Current Mailing Address:

7 JACKSON WALKWAY  
P.O. BOX 6128  
PROVIDENCE, RI 02940

## New Mailing Address:

7 JACKSON WALKWAY  
PROVIDENCE, RI 02903

FEI Number: 05-0147010

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: GORDON, BRAD  
Address: 2 STONEY RUN LANE  
City-St-Zip: MARION, MA 02738

Title: DC ( ) Delete  
Name: CHOQUETTE, JR, PAUL J  
Address: 57 FORGE RD.  
City-St-Zip: EAST GREENWICH, RI 02818

Title: T ( ) Delete  
Name: ROY, RICHARD R  
Address: 10 LEATHERLEAF TRAIL  
City-St-Zip: NORTH KINGSTOWN, RI 02852

Title: D ( ) Delete  
Name: GILBANE, WILLIAM J.  
Address: 2 QUINCY ADAMS ROAD  
City-St-Zip: BARRINGTON, RI

Title: VP ( ) Delete  
Name: RUGGIERI, JOHN T  
Address: 3 LEWIS ST  
City-St-Zip: BARRINGTON, RI 02806

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GILBANE, WILLIAM J.  
Address: 2 QUINCY ADAMS ROAD  
City-St-Zip: BARRINGTON, RI 02806

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN T. RUGGIERI

VP

04/20/2009

Electronic Signature of Signing Officer or Director

Date