FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

AND FILED

95 MAY -1 AM 5:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 846927 (2)

1. Corporation Name

MARSHALL CONTRACTORS, INC.

Principal Place of Business: 75 NEWMAN AVENUE, RUMFORD RI 02916

Mailing Address: 75 NEWMAN AVENUE, RUMFORD RI 02916

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/09/1980
3a. Date of Last Report: 05/01/1994
4. FEI Number: 05-0304036 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business — 21 — Suite, Apt. # etc. 22 — City & State 23 — Zip 24 — Country 25
2a. Mailing Address — 26 — Suite, Apt. # etc. 27 — City & State 28 — Zip 29 — Country 30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS / **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

	12. Officers and Directors	13. Additions/Changes	
TITLE	V		☐ Change ☒ Addition
NAME	PEREIRA, DAVID M.		
STREET ADDRESS	58 LEANN DRIVE		
CITY-ST-ZIP	SEEKONK MA	02771	
TITLE	DVS		☐ Change ☒ Addition
NAME	MARSHALL, JOANANNE		
STREET ADDRESS	760 ELMGROVE AVENUE		
CITY-ST-ZIP	PROVIDENCE RI	02906	
TITLE	PDT		☐ Change ☒ Addition
NAME	MARSHALL III, JOHN L		
STREET ADDRESS	760 ELMGROVE AVENUE		
CITY-ST-ZIP	PROVIDENCE RI	02906	
TITLE	V		☐ Change ☒ Addition
NAME	MCNAMARA, ROBERT A		
STREET ADDRESS	536 PINE ST		
CITY-ST-ZIP	SEEKONK MA	02771	
TITLE	V		☐ Change ☒ Addition
NAME	JAMISON, LAWRENCE W		
STREET ADDRESS	129 WILSON AVENUE		
CITY-ST-ZIP	RUMFORD RI	02916	
TITLE			☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David M. Pereira/Vice President, Finance

4/24/95 — Date

(401) 438-3500 — Daytime Phone #

0483650 FN