2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005274

Entity Name: PERINI BUILDING COMPANY, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal I	New Principal Place of Business:	
73 MT. WA FRAMINGH	YTE AVE. HAM, MA 017	701			
Current Mailing Address:			New Mailing A	New Mailing Address:	
73 MT. WA FRAMINGH	YTE AVE. HAM, MA 017	701			
FEI Number:	86-0083406	FEI Number Applied For ()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Add	ress of New Registered Agent:	
1200 SOUT	DRATION SY TH PINE ISLA DN, FL 3332	AND ROAD			
The above in the State	named entity of Florida.	submits this statement for th	e purpose of changing its reg	gistered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered A	\gent	Date	
Election Cam	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS	AND DIREC	CTORS:	ADDITIONS/CH	IANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VPC (CISKEY, MICH 2 RACEBROO BETHEL, CT (K DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RIZZO, RICHA 4732 E. ARRO) Delete IRD J DYO VERDE DR LLEY, AZ 85253	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MELLACE, SU 23 DIRADO DI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EVPD (BAND, ROBEF 19 WILLIAM J FRAMINGHAW	HEIGHTS	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SHAW, CRAIG	WOOD HILLS DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS (ORTEGA, ROS 16 MARION S' UXBRIDGE, M	Т	Address: 532	(X) Change()Addition NAR, DONNA E GRAFTON STREET EWSBURY, MA 01545	

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: DONNA E. TANNAR AS 04/21/2009