



STATE OF ARIZONA  
CORPORATION COMMISSION  
CORPORATION ANNUAL REPORT  
& CERTIFICATE OF DISCLOSURE

Arizona Corporation Commission



00278316

DUE ON OR BEFORE 03/13/2001

FY00-01

FILING FEE \$45.00

The following information is required by A.R.S. §10-1622 & §10-11622 for all corporations organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form is A.R.S. §10-121.A. & §10-3121.A. **YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM.** Make changes or corrections where necessary. Information for the report should reflect the current status of the corporation. See instructions for proper format. **REFER TO THE INSTRUCTIONS ON PAGE 4.**

RECEIVED

MAR 15 2001

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

F-0827148-6

1. **EDWARDS AND KELCEY CONSTRUCTORS, INC.**  
**% C T CORPORATION SYSTEM**  
**3225 N CENTRAL AVE**  
**PHOENIX, AZ 85012**

Business Phone: (913) 267-0555 (Business phone is optional.)

State of Domicile: **NEW JERSEY** Type of Corporation: **PROFIT**

2. Arizona Statutory Agent: **C T CORPORATION SYSTEM**  
Street Address: **3225 N CENTRAL AVE**  
(NOT P.O. BOX)  
City, State, Zip: **PHOENIX AZ 85012-**

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$ 45

Penalty \$ \_\_\_\_\_

Reinstate \$ \_\_\_\_\_

Expedite \$ \_\_\_\_\_

Resubmit \$ \_\_\_\_\_

If appointing a new statutory agent, the new agent **MUST** consent to that appointment by signing below.

I, (individual) or We, (corporation or limited liability company) having been designated the new Statutory Agent, do hereby consent to this appointment until my removal or resignation pursuant to law.

Signature of new Statutory Agent

3. Secondary Address: **299 MADISON AVE**  
(Foreign Corporations are **REQUIRED** to complete this section.) **MORRISTOWN, NJ 07962**

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

BUSINESS CORPORATIONS

1. Accounting  
2. Advertising  
3. Aerospace  
4. Agriculture  
5. Architecture  
6. Banking/Finance  
7. Barbers/Cosmetology  
8. Construction  
9. Contractor  
10. Credit/Collection  
11. Education  
12. Engineering  
13. Entertainment  
14. General Consulting  
15. Health Care  
16. Hotel/Motel  
17. Import/Export  
18. Insurance  
19. Legal Services  
20. Manufacturing  
21. Mining  
22. News Media  
23. Pharmaceutical  
24. Publishing/Printing  
25. Ranching/Livestock  
26. Real Estate  
27. Restaurant/Bar  
28. Retail Sales  
29. Science/Research  
30. Sports/Sporting Events  
31. Technology(Computers)  
32. Technology(General)  
33. Television/Radio  
34. Tourism/Convention Services  
35. Transportation  
36. Utilities  
37. Veterinary Medicine/Animal Care  
38. Other TOWER MAINTENANCE

NON-PROFIT CORPORATIONS

1. Charitable  
2. Benevolent  
3. Educational  
4. Civic  
5. Political  
6. Religious  
7. Social  
8. Literary  
9. Cultural  
10. Athletic  
11. Science/Research  
12. Hospital/Health Care  
13. Agricultural  
14. Animal Husbandry  
15. Homeowner's Association  
16. Professional, commercial industrial or trade association  
17. Other \_\_\_\_\_

**5. CAPITALIZATION:** (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate.

Number of Shares/Certificates Authorized

100,000

Class  
COMMON

Series Within Class (if any)

NONE

Number of Shares/Certificates Issued

70

Class

COMMON

Series Within Class (if any)

NONE

**6. SHAREHOLDERS:** (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

List shareholders holding more than 20% of any class of shares issued by the corporation, or having more than a 20% beneficial interest in the corporation. Please Type or Print Clearly.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

NONE ☒

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**7. OFFICERS**

Please Type or Print Clearly.

Name: KEVIN J. McMAHON

Title: CHAIRMAN

Address: 3 THOMPSON WAY

MORRIS PLAINS, N.J. 07450

Date taking office: 9/00

Name: KENNETH J. GARRITY

Title: 61 HILEY BROOK ROAD (PRESIDENT)

Address: STOW, MASS 01775

Date taking office: 9/00

Name: THOMAS E. BARAN

Title: VICE PRESIDENT C.F.O.

Address: 235 NORTH BEVERWICK

PARSIIPANY, N.J. 07962

Date taking office: 9/00

Name: ELIZABETH A. REFINSKI

Title: SECRETARY

Address: 35 WHITTLESEY AVE

WEST ORANGE, N.J. 07052

Date taking office: 9/00

**8. DIRECTORS**

Please Type or Print Clearly.

Name: RICHARD E. TANGEL

Address: FEATHERLEIGH RD

CONVENT STATION, N.J. 07960

Date taking office: 9/00

Name: MARK J. PILLA

Address: 11 JENKINS ROAD

ANDOVER, MASS 01810

Date taking office: 9/00

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_

**9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)**

Nonprofit corporations **must attach** a financial statement (balance sheet including assets, liabilities and equity). All other forms of corporations are exempt from filing a financial disclosure.

**9A. MEMBERS (A.R.S. § 10-11622.A.6) Nonprofit Corporations Only**

This corporation **does** ☐ **does not** ☐ have members.

**10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-11622.A.7)**

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 10% of the issued and outstanding common shares or 10% of any other proprietary, beneficial or membership interest in the corporation been: [Underlined portion pertains to profit corporations only]

1. Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the execution of this certificate?
2. Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the seven year period immediately preceding execution of this certificate?
3. Or are subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the seven year period immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order involved the violation of:

- (a) fraud or registration provisions of the securities laws of that jurisdiction; or
- (b) the consumer fraud laws of that jurisdiction; or
- (c) the antitrust or restraint of trade laws of that jurisdiction?

One box **must** be marked:

**YES** ☐

**NO** ☒

If "YES", the following information must be submitted as an attachment to this report for each person subject to one or more of the actions stated in Items 1. through 3. above.

- |   |   |
|---|---|
| 1. Full name and prior names used.                          | 5. Date and location of birth.  |
| 2. Full birth name.   | 6. Social Security Number   |
| 3. Present home address.                                    | 7. The nature and description of each conviction or judicial action; the date and location; the court and public agency involved, and the file or cause number of the case. |
| 4. Prior addresses (for immediate preceding 7 year period). |   |

**11. STATEMENT OF BANKRUPTCY (A.R.S. §§10-202.D.2 & 10-3202.02)**

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 20% of the issued and outstanding common shares or 20% of any other proprietary, beneficial or membership interest in the corporation served in such capacity or held a 20% interest in any other corporation during the bankruptcy, receivership, or charter revocation of the other corporation? [Underlined portion pertains to profit corporations only]

One box **must** be marked:

**YES** ☐

**NO** ☒

Chapter \_\_\_\_\_ Date Filed \_\_\_\_\_ Case Number \_\_\_\_\_

If "YES", the following information **must be submitted** as an attachment to this report for each person subject to the statement above:

- 1) The names and addresses of each corporation and the person or persons involved.
- 2) The state in which each corporation was incorporated.
- 3) The dates of corporate operation.

**12. SIGNATURES**

**CAUTION:** Annual Reports must be signed by a duly authorized officer. Annual Reports submitted with incorrect signatures will be rejected.

I DECLARE, UNDER PENALTY OF LAW, THAT ALL CORPORATE INCOME TAX RETURNS REQUIRED BY TITLE 43 OF THE ARIZONA REVISED STATUTES HAVE BEEN FILED WITH THE ARIZONA DEPARTMENT OF REVENUE.

I further declare under penalty of law that I (we) have examined this report and the certificate, including any attachments, and to the best of my (our) knowledge and belief they are true, correct and complete.

Name KEVIN J. McMAHON Date 3/3/01 Name THOMAS E. BARRY Date 3/3/01

Signature [Signature] Signature [Signature]

Title CHAIRMAN Title V.P. CFO

(Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)