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State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: $50.00* **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK**

**** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation		
42364	HATTOY LANDSCAPING, INC.		
3. Street Address Principal Business Office	City	State	Zip
315 Blackrock Road	Coventry	RI	02816
4. Business Phone No.	5. State of Incorporation		
(401) 821-5549	RHODE ISLAND		

6. Brief Description of the Character of Business Conducted in Rhode Island
Retail and wholesale landscaping nursery business

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

President Name			Vice President Name		
Denise M. Hattoy			Mark E. Hattoy		
Street Address			Street Address		
315 Blackrock Road			315 Blackrock Road		
City	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816
Secretary Name			Treasurer Name		
Denise M. Hattoy			Mark E. Hattoy		
Street Address			Street Address		
315 Blackrock Road			315 Blackrock Road		
City	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816

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

Director Name			Director Name		
Denise M. Hattoy			Mark E. Hattoy		
Street Address			Street Address		
315 Balckrock Road			315 Blackrock Road		
City	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
500 NO PAR VALUE		

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
300	Common	None

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.

Denise Hattoy 2-7-08
Signature *Date*

Denise Hattoy
Print or Type Name

president
Title

File Date FILED

Check No. FEB 12 2008

By: By DS-116154

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20478-15-230348

Form 630 Rev. 12/06