RI SOS Filing Number: 200809987470 Date: 03/31/2008 4:00 PM

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 | | |
|---|---|---|---|
| 91831 | Four Seasons Landscaping, Inc. | | |
| 3. Street Address Principal Business Office | City | State | Zip |
| 132 Atlantic Avenue | Woonsocket | RI | 02895 |
| 4. Business Phone No. | 5. State of Incorporation | | |
| (401) 762-3434 | Rhode Island | | |

6. Brief Description of the Character of Business Conducted in Rhode Island
General business of landscaping

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

| President Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Christopher Lahousse | 132 Atlanta Avenue | Woonsocket | RI | 02895 |

| Vice President Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Pamela Lahousse | 132 Atlanta Avenue | Woonsocket | RI | 02895 |

| Secretary Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Pamela Lahousse | 132 Atlanta Avenue | Woonsocket | RI | 02895 |

| Treasurer Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Christopher Lahousse | 132 Atlanta Avenue | Woonsocket | RI | 02895 |

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

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Christopher Lahousse | 132 Atlanta Avenue | Woonsocket | RI | 02895 |

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Pamela Lahousse | 132 Atlanta Avenue | Woonsocket | RI | 02895 |

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| | | | | |

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| | | | | |

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

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value |
|---|---|---|
| 8,000 | No Par Value | |
| | | |

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

| Number of Shares | Class/Series | Par Value |
|---|---|---|
| *200* | Common No Par Value | |
| | | |

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.

[redacted] [redacted]

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.

1/4/08

*Signature* *Date*

Christopher Lahousse

*Print or Type Name*

President

*Title*

*File Date* FILED

*Check No.*

*By:* MAR 31 2008 D81365C

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[redacted]

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