

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222,3040

## 2009 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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 LARLHAM LANDSCAPE CONSTRUCTION CO. INC. 111469 3. Street Address Principal Business Office 3945 Old Post Road City Charlestown State RI 02813 4. Business Phone No 5. State of Incorporation RHODE ISLAND (401) 364-0303 6. Brief Description of the Character of Business Conducted in Rhode Island Landscape design, construction and maintenance 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name President Name Matthew C. Larlham None Street Address Street Address 3945 Old Post Road ZibState City RI 02813 Charlestown Secretary Name Matthew C. Larlham Matthew C. Larlham Street Address Stroot Address 3945 Old Post Road 3945 Old Post Road State 02813 02813 RΙ Charlestown RΙ Charlestown 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Matthew C. Larlham Street Address Street Address 3945 Old Post Road State Zip State ZiDCity 02813 RΙ Charlestown Director Name Director Name Street Address Street Address City State City State Zip10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 9. SHARES AUTHORIZED ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Par Value This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of no par value 100 common instruction sheet. 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. Signature Check No. Matthew C. Larlham Print or Type Name President FOR SECRETARY OF STATE USE ONLY Title