

A. Ralph Mollis, Secretary of State Corporations Division 1-18 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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. 7-1.2-150).

subject to a penalty fee of \$25.00.		and the state of t	inai report within tentry (, 167) 1444.	s igier ine itme prescribea by i	un (R.I.G.L. 7-1,2-1501(cord))	
1. Corporate ID No. <b>70980</b>		2. Name of Corporation J.P.R. UNDERGROUND LAWN SPRINKLER, INC.				
3 Street Address Principal Business Office 489 North Qudnesset Road			North Kingstown	State RI	Zip 02852	
4. Business Phone No. 401-886-4455  5. State of Incorporation Rhode Island						
6. Brief Description of the Charactinstall, repair and maintai	n underground l	aw irrigation systems			***	
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Joseph P. Razza			CHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  none			
Street Address 489 North Quidnessett Road			Street Address			
North Kingstown	State RI	<sup>Zip</sup> 02852	СЦу	State	Zip	
Secretary Name Joseph P. Razza			Treasure: Name Joseph P. Razza			
Sirved Address same as above			Street Address 489 North Quidnesset Road			
City	State	Zip	North Kingtown	State RI	<sup>Ζιρ</sup> 02852	
8. NAMES AND ADDRESS: Director Name None	ES OF THE DIRI	ECTORS: ("X" BOX FOR ATI	ACHMENT) TELL IN Director Name	SPACES BEFORE USIN	NG ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Сйу	State	Zip	
9. SHARES AUTHORIZED			10. SHARES ISSUED ( ISSUED SHARES — THIS SECT			
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value	
			50	common	no par	
This report must be execute this report must be execute	ed on behalf of the dombehalf of the dombehalf of the	he corporation by an authorize to corporation by the receiver of	d representative. If the cor or trustee.	rporation is in the hand	ls of a receiver or trustee,	

	including any accompanying sched
File Date 2-26-09	contained herein are true and corre
Check No3126	Signative Joseph P. Razza
FOR SECRETARY OF STATE USE ONLY	Print or Type Name President
POR SECRETARY OF STATE USE ONLY	Title

and affirm that I have examined this report, ules and statements, and that all statements