



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

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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000154919		2. Name of Corporation John B Landscaping Inc.			
3. Street Address Principal Business Office 185 Budlong Rd.		City Cranston	State RI	Zip 02920	
4. Business Phone No. 401-595-9958		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island Services, landscape maintenance					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael D Devany			Vice President Name Kyle M Benchsky		
Street Address 2 Dutchess Dr.			Street Address 185 Budlong Rd.		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02920
Secretary Name None			Treasurer Name None		
Street Address None			Street Address None		
City None	State None	Zip None	City None	State None	Zip None
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name None		
Street Address None			Street Address None		
City None	State None	Zip None	City None	State None	Zip None
Director Name None			Director Name None		
Street Address None			Street Address None		
City None	State None	Zip None	City None	State None	Zip None
9. SHARES AUTHORIZED 8,000.00			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 400.00	Class/Series STK	Par Value 0.0100
			None	None	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.

FILED	
File Date OCT 02 2009	Check No. 683358043
By Michael D Devany	
FOR SECRETARY OF STATE USE ONLY	

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 **Michael D Devany** Date **10-01-09**
Print or Type Name
Title **President**