

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 2010 Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

ubject to a penalty fee of \$25. 1. Corporate ID No.		oration				
105681		2. Name of Corporation MURDOCK LANDSCAPING, INC.				
3. Street Address Principal Business Office 5 Hardwood Lane			City Westerly	State RI	7.ip 02891	
4. Business Phone No. 401-596-1984 5. State of Incorporation Rhode Island						
S. Brief Description of the Cha to engage in the busir	ness of landscape w	ork				
	ESSES OF THE OFFI	CERS: ("X" BOX FOR ATTA	CHMENT) [FILL IN S Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
President Name			Susan Beth Murdock			
David M. Murdock						
Street Address 5 Hardwood Lane			5 Hardwood Lane			
ਹਾਂ _ਪ Westerly	State RI	02891	City Westerly	State RI	^{Zip} 02891	
Secretary Name Barbara Murdock			Treasurer Name Joseph Murdock			
Street Address 5 Hardwood Lane			Street Address 5 Hardwood Lane			
^{City} Westerly	State RI	71p 02891	City Westerly	State RI	^{Zip} 02891	
8. NAMES AND ADDR	ESSES OF THE DIRI	ECTORS: ("X" BOX FOR ATT		N SPACES BEFORE USIN	G ATTACHMENTS	
Director Name			Director Name			
David M. Murdock	 		David R. Murdock			
Street Address			Street Address			
5 Hardwood Lane			5 Hardwood Lane			
City	State	Zip	City	State	Zip 02904	
Westerly	J RI	02891	Westerly	[RI	02891	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZ	ZED	1	10. SHARES ISSUED	("X" BOX FOR ATTAC	HMENT) 🗌	
			ISSUED SHARES — THIS SI	ECTION MUST BE COMPLETED		
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	
			100	common	no par	
This report must be ex	secuted on behalf of	the corporation by an authoriz	ed representative. If the	corporation is in the hand	ds of a receiver or tr	
this report must be exc	ecuted on behalf of t	ne corporation by the receiver	or trustee.			

File Date FILED	
Check NJAN 1 3 2010	
By: By 2798	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm including any accompanying schedules and s	
contained herein are true and correct. Mandel	1/12/09
Signature	Date
David M. Murdock	
Print or Type Name	
President	
Title	Form 630 Rev. 08/08