



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 2010

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. 4884		2. Name of Corporation Corsi Landscape Construction, Inc.			
3. Street Address Principal Business Office 26 Putnam Avenue		City Johnston	State RI	Zip 02919	
4. Business Phone No. (401) 232-0140		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island LANDSCAPE CONSTRUCTION					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Vincent Corsi, Jr.			Vice President Name Anthony Corsi		
Street Address 26 Putnam Avenue			Street Address 26 Putnam Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Anthony Corsi			Treasurer Name Vincent Corsi, Jr.		
Street Address 26 Putnam Avenue			Street Address 26 Putnam Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
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			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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 <u>MUST</u> BE COMPLETED		
			Number of Shares 200	Class/Series Common	Par Value No Par

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 FEB 01 2010

Check No. 90 1455

By: _____

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

Date

Vincent Corsi, Jr.

Print or Type Name

President

Title