



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

**\*\*A M E N D E D\*\***

A. Ralph Molis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** (AMENDED) 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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 129064		2. Name of Corporation LANDSCAPE CREATIONS OF RHODE ISLAND, INC.			
3. Street Address Principal Business Office 715 Mooresfield Road			City Saunderstown	State RI	Zip 02874
4. Business Phone No. (401)789-7101		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island To operate the business of a landscaping contractor, including masonry work related thereto.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jonathan Zeyl			Vice President Name Michael Coutu		
Street Address 715 Mooresfield Road			Street Address 30 Nobscot Road, Unit 6		
City Saunderstown	State RI	Zip 02874	City Sudbury	State MA	Zip 01776
Secretary Name Michael Coutu			Treasurer Name Jonathan Zeyl		
Street Address 30 Nobscot Road, Unit 6			Street Address 715 Mooresfield Road		
City Sudbury	State MA	Zip 01776	City Saunderstown	State RI	Zip 02874
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Jonathan Zeyl			Director Name Michael Coutu		
Street Address 715 Mooresfield Road			Street Address 30 Nobscot Road, Unit 6		
City Saunderstown	State RI	Zip 02874	City Sudbury	State MA	Zip 01776
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION 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 1,000	Class/Series	Par Value 1.00
			THIS SECTION MUST BE COMPLETED		

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.

12:42  
**FILED**  
**SEP 27 2010**  
By *[Signature]*  
File Date  
Check No.  
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]* 09/24/2010 s  
Signature Date  
JONATHAN ZEYL  
Print or Type Name  
PRESIDENT  
Title