

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 2011
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. 7-1.2-1;	501(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. /-1.2-1501(c&a)) is
subject to a penalty fee of \$25.00.	
1. Corporate ID No.	2. Name of Corporation

Corporate ID No. 157217		2. Name of Corporation ARRAY, INC				
3. Street Address Principal Business Office 173 LYNNE LANE			MAPLEVILLE	State RI	^{Ζφ} 02839	
. Business Phone No. 5. State of Incorporation RHODE ISLAND			<u> </u>			
Brief Description of the Chara ANDSCAPING					HANNER & STREET & ST. SALVANCE	
NAMES AND ADDRESS esident Name RAYMOND RABITAL		CERS: ("X" BOX FOR ATTA	Vice President Name SUZANNE RABITAL		111ACHMEN15	
Street Address 173 LYNNE LANE			Street Address 173 LYNNE LANE			
uy MAPLEVILLE	State R I	02839	City MAPLEVILLE	State RI	^{Ζίρ} 02839	
Secretary Name SUZANNE RABITAILLE			Treasurer Name RAYMOND RABITAILLE			
Street Address 173 LYNNE LANE			Street Address 173 LYNNE LANE			
MAPLEVILLE	State RI	02839	MAPLEVILLE	State RI	02839	
S. NAMES AND ADDRE Director Name RAYMOND RABITAL		ECTORS: ("X" BOX FOR ATT	TACHMENT) FILL IN Director Name SUZANNE RABITA		ATTACHMEN	
Street Address 173 LYNNE LANE			Street Address 173 LYNNE LANE			
ाए MAPLEVILLE	State RI	^{Zip} 02839	City MAPLEVILLE	State RI	7ip 02839	
Oirector Name			Director Name			
Street Address			Street Address			
Сиу	State	Zip	CHy	State	Zip	
). SHARES AUTHORIZ	ED .	1	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is our	rantly of record in	the Office of the Secretary of	Number of Shares	Class/Series	Par Value	
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.			200	COMMON	\$.01	

	FILED
File Date _	FEB 1 5 2011
Check No	1352
F	OR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I decl	are and affirm that I have examined this report, hedules and statements, and that all statements
contained herein are true and	orrect.
Taymey w	Tale (ce e) 2/12/1
Sighature	Date
KAYMAND W	RABITAILLE
Print or Type Name PRESIDEN T	<i>T</i>
Title	Form 630 Rev. 08/08