

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. 7-1.2-1501(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.

subject to a penalty jee of \$2,7.00.					
1. Corporate ID No. 117083	2. Name of Corporation PORTSMOUTH NURSERY, INC.				
3. Street Address Principal Business Office 1350 EAST MAIN RD.			PORTSMOUTH	State RI	<i>Ζφ</i> <b>02871</b>
4. Business Phone No.         5. State of Incorporation           401-683-2551         RHODE ISLAND				<u> </u>	
6. Brief Description of the Character of To own & operate a wholesa			ricultural business of growing	& selling nursery stock	K. <sub>.</sub>
7. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) TILL IN SPACE  Vice President Name	S BEFORE USING ATT	ACHMENTS
Jean M. Cotta			Steven Cotta		
Street Address 15 Terrace Drive			Street Address 175 Briarwood Lane		
Bristol Bristol	State	<sup>2:p</sup> 02809	City Portsmouth	Sizue RI	<sup>Zip</sup> 0 <b>28</b> 71
Secretary Name Steven Cotta			Treasurer Name Jean M. Cotta		
Street Address 175 Briarwood Lane			Street Address 15 Terrace Drive		
Portsmouth	State RI	Հւթ 02871	City Portsmouth	Siale RI	<i>Zip</i> 02809
8. NAMES AND ADDRESSES Director Name NONE	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) TILL IN SPA	CES BEFORE USING A	ITACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. shares authorized			10. SHARES ISSUED ("X" ISSUED SHARES — THIS SECTION	电影 化二氯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	INT)
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of instruction sheet.			666.66	COMMON	NO PAR
2000 DO PAR VALUE			Magan Gröt Filit		
This report must be executed	on behalf of the corp	oration by an authorize	d representative. If the corpor	ation is in the hands of	a receiver or trustee,

this report must be executed on behalf of the corporation by the receiver or trustee.

	Y Whateh
File Date	
Check No. FEB 24 2	
By	<u>re</u>
FOR SECRETARY OF STATE USE	ONLY

Under penalty of perjury, I declare and affirm the including any accompanying schedules and state contained herein are true and horresty.	
Kinhald Catta	2/21/2011
Signature	Date /
Richard J. Cotta	,
Print or Type Name	
BOOKKEEPER	
Title	