



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 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.

1. Corporate ID No. <b>524206</b>		2. Name of Corporation <b>Simply Safer Rhode Island, Inc</b>		
3. Street Address Principal Business Office <b>100 Cottage Street</b>			City <b>Pawtucket</b>	State <b>RI</b>
			Zip <b>02860</b>	
4. Business Phone No. <b>508-384-4444</b>		5. State of Incorporation <b>RI</b>		
6. Brief Description of the Character of Business Conducted in Rhode Island <b>Lawn fertilization</b>				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name <b>Dan Theriault</b>		Vice President Name <b>none</b>		
Street Address <b>20427 Marblehead Court</b>		Street Address		
City <b>Cornelius</b>	State <b>NC</b>	Zip <b>28031</b>	City	State
Secretary Name <b>Laurette Theriault</b>		Treasurer Name <b>Michael Powers Jr.</b>		
Street Address <b>20427 marblehead Court</b>		Street Address <b>326 Benefit St</b>		
City <b>Cornelius</b>	State <b>NC</b>	Zip <b>28031</b>	City <b>Providence</b>	State <b>RI</b>
		Zip <b>02903</b>		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name <b>none</b>		Director Name <b>none</b>		
Street Address		Street Address		
City	State	Zip	City	State
Director Name <b>none</b>		Director Name <b>none</b>		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED <b>10,000</b>		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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 MUST BE COMPLETED		
		Number of Shares	Class/Series	Par Value
		<b>2500</b>	<b>none</b>	<b>CNP</b>
	<b>2500</b>	<b>none</b>	<b>CNP</b>	
	<b>5000</b>	<b>none</b>	<b>CNP</b>	

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 **OCT 21 2011**  
 Check No. By **[Signature]**  
 By: **0220**  
 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.

**Laurette Theriault** 9-23-11  
 Signature Date  
**Laurette Theriault**  
 Print or Type Name  
**Secretary**  
 Title