



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.
 Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 56949		2. Exact name of the Corporation Yard Service Landscape Experts, Inc.		
3. Principal office address 50 Gilbane Street		City Warwick	State RI	Zip 02886
4. Business Phone No. 401-828-1202		5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island general landscaping and maintenance, repair and upkeep of grounds and real estate				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
President Name Robert J. Gauthier		Vice-President Name Kathleen A. Gauthier		
Street Address 101 North River Drive		Street Address 101 North River Drive		
City Narragansett	State RI	Zip 02882	City Narragansett	State RI
Secretary Name Robert J. Gauthier		Treasurer Name Kathleen A. Gauthier		
Street Address 101 North River Drive		Street Address 101 North River Drive		
City Narragansett	State RI	Zip 02882	City Narragansett	State RI
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name Robert J. Gauthier		Director Name Kathleen A. Gauthier		
Street Address 101 North River Drive		Street Address 101 North River Drive		
City Narragansett	State RI	Zip 02882	City Narragansett	State RI
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
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.		NUMBER OF SHARES 100	CLASS/SERIES common	PAR VALUE none

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

FEB 24 2014

File Date _____

Check No _____

By: BY 6460

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.

Robert J. Gauthier 2-20-14
 Signature of Authorized Representative Date

Robert J. Gauthier

Print or Type Name of Authorized Representative

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