



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 2016

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. 105845		2. Exact name of the Corporation C. JOHNSON LANDSCAPE COMPANY, INC.			
3. Principal office address 240 Pippin Orchard Road		City Cranston	State RI	Zip 02921	
4. Business Phone No. 401-943-0027		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island To provide landscaping services of every nature and description.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Charles E. Johnson		Vice-President Name Chad Johnson			
Street Address 240 Pippin Orchard Road		Street Address 240 Pippin Orchard Road			
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Joanne R. Johnson		Treasurer Name Joanne R. Johnson			
Street Address 240 Pippin Orchard Road		Street Address 240 Pippin Orchard Road			
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Charles E. Johnson		Director Name Joanne R. Johnson			
Street Address 240 Pippin Orchard Road		Street Address 240 Pippin Orchard Road			
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Director Name Charles E. Johnson		Director Name Joanne R. Johnson			
Street Address 240 Pippin Orchard Road		Street Address 240 Pippin Orchard Road			
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
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	CLASS/SERIES	PAR VALUE	
		100	common	no par value	

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.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

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 of Authorized Representative

02/09/2016

Date

Charles E. Johnson

Print or Type Name of Authorized Representative

FEB 29 2016
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