



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

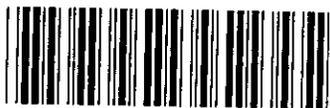
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 110101		2. Name of Corporation The Gifford Design Group, Inc.			
3. Street Address Principal Business Office 1621 Mendon Road			City Cumberland	State RI	Zip 02864
4. Business Phone No. (401) 335-4400		5. State of Incorporation RHODE ISLAND			6. SIC Code 7682
7. Brief Description of the Character of Business Conducted in Rhode Island LANDSCAPE ARCHITECT.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name George H. Gifford, III			Vice President Name None		
Street Address 1621 Mendon Road			Street Address same		
City Cumberland	State RI	Zip 02864	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
Number of Shares	Class Series	Par Value	Number of Shares	Class Series	Par Value
600 NO PAR VALUE			100	Common	No par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 0 1 0 1 *

File Date **FILED**
Check No. **AUG 16 2004**
By **M41268**

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.

Signature of Officer **George H. Gifford III** Date **8-16-04**
Print or Type Name of Officer **GEORGE H. GIFFORD III PRES.**

PRESIDENT