



STATE OF RHODE ISLAND
George H. Gifford, III
Office of the Secretary of State

none

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. **110101** 2. Name of Corporation **The Gifford Design Group, Inc.**

3. Street Address Principal Business Office **1621 Mendon Rd** 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 Architecture & Environmental Planning

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) 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) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

None

Director Name

None

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)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

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: 5-13-02

Check No.: 2623

By: [Signature]

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

Date

George H. Gifford, III

Print or Type Name of Officer

Title of Officer

PRESIDENT