State of Rhode Island and Providence Plantation Office of the Secretary of State			Fee: \$20.00	
	Division Of Business	Services		
	148 W. River St			
	Providence RI 0290			
HOPE	(401) 222-304	40		
Non-Profit Corporation Annual Report Filing Period: June 1 - June 30				
In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2015				
1. Corporate ID No. 001037257				
2. Name of Corporation <u>AgLaw Rhode Island</u>				
3. State of Incorporation				
State: <u>RI</u>				
4. Corporate Address in Rhode Island				
No. and Street: 140 SUMNER BROWN RD				
City or Town: CUMBERLAND State: RI Zip: 02864 Country: USA				
5. Foreign Corporation. Enter Principal Office Address				
No. and Street:				
City or Town: State: Zip: Country:				
C. Brief Description of the Character of the Affaire Which are Actually Conducted in Dhode Jaland				
6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island				
TO PROVIDE LEGAL ASSISTANCE TO SUPPORT AND ENCOURAGE AGRICULTURE AND				
OPEN SPACE PRESERVATION IN RHODE ISLAND.				
7. Names and Addresses of the Officers and Directors:				
All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete				
THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23				
Title	Individual Name	Address		
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country	
DIRECTOR	JAMES E. MARSZALKOWSKI	140 SUMNER BROWN CUMBERLAND, RI 02864 L	-	
DIRECTOR	ALEX MARSZALKOWSKI	140 SUMNER BROWN CUMBERLAND, RI 02864 L		

DIRECTOR	ALYSON MARSZALKOWSKI	JOSLIN RD GLENDALE, RI 02826 USA		
8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78 ALEX D. MARSZALKOWSKI, ESQ. <u>140 SUMNER BROWN ROAD</u> <u>CUMBERLAND</u> , <u>RI</u> <u>02864</u>				
9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.				
Signed this 26 Day of June, 2016 at 10:52:12 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6. By <u>ALEX MARSZALKOWSKI</u> Signature of Authorized Person				
Form No. 631 Revised 09/07				
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