State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017

Corporation

→ Filing period: January 1 - March 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by April 1.

1. Entity ID Number	2. Exact name of the Corporation
000048363	**Fresh & Fancy Farms Inc.**

3. Principal Office Address	City	State	Zip
669 Elmwood Ave	**Providence**	**RI**	**02907**

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
42 - Wholesale Trade	**Wholesale commercial food equipment & supplies**
5. State of Incorporation	
RI	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
Brendan F. Whelan	**none**
Street Address **4400 Post Rd**	Street Address
City **Warwick** / State **RI** / Zip **02818**	City / State / Zip
Secretary Name **none**	Treasurer Name **none**
Street Address	Street Address
City / State / Zip	City / State / Zip

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Director Name
Brendan F. Whelan	**none**
Street Address **4400 Post Rd**	Street Address
City **Warwick** / State **RI** / Zip **02818**	City / State / Zip
Director Name **none**	Director Name **none**
Street Address	Street Address
City / State / Zip	City / State / Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Department of State.	**200**		**$200**
Changes require an additional filing.			

11. 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.

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.

Name of Authorized Representative	Date
Brendan F. Whelan	**1/9/17**

Signature of Authorized Representative: Brendan F. Whelan

FILED

JAN 30 2017

BY 1110

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630 - Revised: 10/2016