



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016

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 132695		2. Exact name of the Corporation Gerbs Pumpkin Seed Company			
3. Principal Office Address 92 Allendale Ave.			City Johnston	State RI	Zip 02919
4. Business Phone Number 401-231-5181			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Wholesale Food Manufacturing					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Galen T. Conte			Vice-President Name Sennen G. Conte		
Street Address 17 Anthony Road			Street Address 91 Vinton Ave.		
City Barrington	State RI	Zip 02806	City Cranston	State RI	Zip 02920
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			2		
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 Galen T. Conte				Date 11/15/2016	
Signature of Authorized Representative					
SIGN DOCUMENT HERE					

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

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 FEB 10 2017
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