RI SOS Filing Number: 201735175320 Date: 2/27/2017 4:00:00 PM

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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

1. Entity ID Number	2. Exact nan	ne of the Corporation	on		 				
8239		Steere Farm, Inc.							
3. Principal Office Address				City		Zip			
Pole 202, Victory Highway	•		Chepachet		RI	02814			
4. NAICS Code		cription of the chara	cter of business	conducted in Rhode	Island	<u> </u>			
81 - Other Services (excep	excavating	contractor, custo	m farming						
5. State of Incorporation									
Rhode Island	j								
7. List ALL officers (names ar	nd addresses)			Chec	k the box to	indicate an attachment			
President Name George O. Steere, Jr.			Vice-President Name George O. Steere, Jr.						
Street Address 96 John Steere Road			Street Address 96 John Steere Road						
^{City} Chepachet	State RI	^{Zip} 02814	City Chepac			State RI Zip 02814			
Secretary Name George O. St	eere, Jr.		Treasurer Na	Treasurer Name George O. Steere, Jr.					
Street Address 96 John Steere Road		Street Address 96 John Steere Road							
City Chepachet	State RI	^{Zip} 02814	City Chepachet		State RI	^{Zip} 02814			
8. List ALL directors (names a	and addresses)				k the box to	indicate an attachment			
B. List ALL directors (names and addresses) Director Name George O. Steere, Jr.		Director Name							
Street Address 96 John Steer	Street Address 96 John Steere Road		Street Address						
City Chepachet	State RI	^{Zip} 02814	City		State	Zip			
Director Name	<u> </u>		Director Nam	e	l	1			
Street Address			Street Addres	s					
City	State	Zip	City		State	Zip			
9. Shares Authorized		10. Shares Iss	sued	Chec	k the boy to	ndicate an attachment			
			DE SHARES CLASS/S		heck the box to indicate an attachment L SERIES PAR VALUE				
Department of State. 300 Changes require an additional filing.		300	300			no par value			
11. This report must be execu					oration is in	the hands of a receiver or			
rustee, this report must be ex Under penalty of perjury, I o	declare and affirm	that I have examin	ed this report,		mpanying s	chedules and			
statements, and that all stat Name of Authorized Represer		herein are true ar	id correct.		Date				
George O. Steere, Jr. $2/2\partial//7$						22/17			
Signature of Authorized Repre	eseptative	10/1	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					
XHMAL	Mall	UT)	**						

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

EGRM 630 - Revised: 02/2017