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State of Rhode Island and Providence Plantations Office of the Secretary of State

No Fee

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Busines	ss Cor	porati	on
Annual	Repor	t - Am	ended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2017

- 1. Corporate ID No. 000067501
- 2. Name of Corporation <u>WEST BAY LANDSCAPE, INC.</u>
- 3. Street Address Principal Business Office:

No. and Street: 199 RIVER ROAD

City or Town: NORTH KINGSTOWN State: RI Zip: 02874 Country: USA

4. Business Phone No.

5. State of Incorporation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

23

6. Brief Description of the Character of Business Conducted in Rhode Island

LANDSCAPE CONSTRUCTION MAINTENANCE AND DESIGN.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	MICHAEL A GIRARDI	199 RIVER ROAD NORTH KINGSTOWN, RI 02874 USA	
VICE PRESIDENT	MICHAEL A GIRARDI	199 RIVER ROAD NORTH KINGSTOWN, RI 02874 USA	

SECRETARY	MICHAEL A GIRARDI	199 RIVER ROAD NORTH KINGSTOWN, RI 02874 USA
TREASURER	MICHAEL A GIRARDI	199 RIVER ROAD NORTH KINGSTOWN, RI 02874 USA
DIRECTOR	MICHAEL A GIRARDI	199 RIVER ROAD NORTH KINGSTOWN, RI 02874 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.0000	1,000.00	100

9. 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.

Signed this 13 Day of March, 2017 at 3:34:52 PM. 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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By MICHAEL A. GIRARDI

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

March 13, 2017 03:34 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

