



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

**FILED**

FEB 12 2019 *ov*

Annual Report for the year: **2019**  
 Corporation

BY Colson

- 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<br><b>18362</b>                                                                                                                                                                                                               |                    | 2. Exact name of the Corporation<br><b>Windy Hill Nurseries, Inc.</b>                                         |                                                |                                                                  |                     |
| 3. Principal Office Address<br><b>52 West Main Road</b>                                                                                                                                                                                           |                    |                                                                                                               | City<br><b>Little Compton</b>                  | State<br><b>RI</b>                                               | Zip<br><b>02837</b> |
| 4. NAICS Code<br><b>561730</b>                                                                                                                                                                                                                    |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>Landscaping; Title: ...</b> |                                                |                                                                  |                     |
| 5. State of Incorporation<br><b>RI</b>                                                                                                                                                                                                            |                    |                                                                                                               |                                                |                                                                  |                     |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                    |                    |                                                                                                               |                                                |                                                                  |                     |
| President Name<br><b>Carolyn L. Faria</b>                                                                                                                                                                                                         |                    |                                                                                                               | Vice-President Name<br><b>Carolyn L. Faria</b> |                                                                  |                     |
| Street Address<br><b>52 West Main Road</b>                                                                                                                                                                                                        |                    |                                                                                                               | Street Address<br><b>52 West Main Road</b>     |                                                                  |                     |
| City<br><b>Little Compton</b>                                                                                                                                                                                                                     | State<br><b>RI</b> | Zip<br><b>02837</b>                                                                                           | City<br><b>Little Compton</b>                  | State<br><b>RI</b>                                               | Zip<br><b>02837</b> |
| Secretary Name<br><b>Christopher M. Faria</b>                                                                                                                                                                                                     |                    |                                                                                                               | Treasurer Name<br><b>Carolyn L. Faria</b>      |                                                                  |                     |
| Street Address<br><b>59 Peckham Road</b>                                                                                                                                                                                                          |                    |                                                                                                               | Street Address<br><b>52 West Main Road</b>     |                                                                  |                     |
| City<br><b>Little Compton</b>                                                                                                                                                                                                                     | State<br><b>RI</b> | Zip<br><b>02837</b>                                                                                           | City<br><b>Little Compton</b>                  | State<br><b>RI</b>                                               | Zip<br><b>02837</b> |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                   |                    |                                                                                                               |                                                |                                                                  |                     |
| Director Name<br><b>Gabriel Faria, Jr.</b>                                                                                                                                                                                                        |                    |                                                                                                               | Director Name<br><b>Carolyn L. Faria</b>       |                                                                  |                     |
| Street Address<br><b>52 West Main Road</b>                                                                                                                                                                                                        |                    |                                                                                                               | Street Address<br><b>52 West Main Road</b>     |                                                                  |                     |
| City<br><b>Little Compton</b>                                                                                                                                                                                                                     | State<br><b>RI</b> | Zip<br><b>02837</b>                                                                                           | City<br><b>Little Compton</b>                  | State<br><b>RI</b>                                               | Zip<br><b>02837</b> |
| Director Name                                                                                                                                                                                                                                     |                    |                                                                                                               | Director Name                                  |                                                                  |                     |
| Street Address                                                                                                                                                                                                                                    |                    |                                                                                                               | Street Address                                 |                                                                  |                     |
| City                                                                                                                                                                                                                                              | State              | Zip                                                                                                           | City                                           | State                                                            | Zip                 |
| 9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                          |                    |                                                                                                               |                                                |                                                                  |                     |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.                                                                                                                                  |                    | 10. Shares Issued                                                                                             |                                                | Check the box to indicate an attachment <input type="checkbox"/> |                     |
|                                                                                                                                                                                                                                                   |                    | NUMBER OF SHARES<br><b>00</b>                                                                                 | CLASS/SERIES<br><b>Common</b>                  | PAR VALUE<br><b>No Par</b>                                       |                     |
| 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. |                    |                                                                                                               |                                                |                                                                  |                     |
| <b>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.</b>                                       |                    |                                                                                                               |                                                |                                                                  |                     |
| Name of Authorized Representative<br><b>Carolyn L. Faria</b><br><i>Carolyn L. Faria</i>                                                                                                                                                           |                    |                                                                                                               |                                                | Date<br><b>1-13-19</b>                                           |                     |
| Signature of Authorized Representative                                                                                                                                                                                                            |                    |                                                                                                               |                                                |                                                                  |                     |

MAIL TO:  
 Division of Business Services  
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