



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 111724		2. Exact name of the limited liability company Scotty's Landscaping, L.L.C.	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island LANDSCAPING	
5. Principal office address 8 Manning Court		City Coventry	State RI
		Zip 02816	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Scott S. McDermott		Contact Title Member	
Street Address 8 Manning Court		City Coventry	State RI
		Zip 02816	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name EDWARD J. GOMES, ESQ.		Address	
Address 91 FRIENDSHIP STREET		City PROVIDENCE	Zip 02903-

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



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.

File Date 9/19/05 \*111724\*

Check No. 3425

By: (Signature)

(Signature) 9/15/05  
Signature of Authorized Person Date

Scott S. McDermott, Member



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
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Matthew A. Brown, Secretary of State

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100 North Main Street  
Providence, RI 02903-1335  
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**LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No 111724		2. Exact name of the limited liability company Scotty's Landscaping, L.L.C.			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island LANDSCAPING			
5. Principal office address 8 Manning Court		City Coventry	State RI	Zip 02816	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Scott S. McDermott			Contact Title Member		
Street Address 8 Manning Court		City Coventry	State RI	Zip 02816	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name EDWARD J. GOMES, ESQ.			Address		
Address 91 FRIENDSHIP STREET		City PROVIDENCE	Zip 02903-		

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



\* 1 1 1 7 2 4 \*

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.

File Date: \_\_\_\_\_  
Check No.: SEP 27 2004  
By: BY 3405 GJM

Signature of Authorized Person: Scott S. McDermott Date: 7/22/04  
Scott S. McDermott, Member



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003**

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No <b>111724</b>		2. Exact name of the limited liability company <b>Scotty's Landscaping, L.L.C.</b>		
3. State of Formation <b>RHODE ISLAND</b>		4. Brief description of the character of the business which is actually conducted in Rhode Island <b>LANDSCAPING</b>		
5. Principal office address <b>8 Manning Court</b>		City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:				
Contact Name <b>Scott S. McDermott</b>		Contact Title <b>Member</b>		
Street Address <b>8 Manning Court</b>		City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52				
Manager Name		Manager Name		
Street Address		Street Address		
City	State	Zip	City	State
Manager Name		Manager Name		
Street Address		Street Address		
City	State	Zip	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11				
Agent Name <b>EDWARD J. GOMES, ESQ.</b>		Address		
Address <b>91 FRIENDSHIP STREET</b>		City <b>PROVIDENCE</b>	Zip <b>02903-</b>	

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



\* 1 1 1 7 2 4 \*

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.

File Date 9-23-03  
Check No. 3286  
By: Sc

Scott S. McDermott 9/19/03  
Signature of Authorized Person Date

**Scott S. McDermott, Member**



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

**LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002**

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. <b>111724</b>		2. Exact name of the limited liability company <b>Scotty's Landscaping, L.L.C.</b>	
3. State of Formation <b>RHODE ISLAND</b>		4. Brief description of the character of the business which is actually conducted in Rhode Island <b>LANDSCAPING</b>	
5. Principal office address <b>8 Manning Court</b>		City <b>Coventry</b>	Zip <b>02816</b>
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name <b>Scott S. McDermott</b>		Contact Title <b>Member</b>	
Street Address <b>8 Manning Court</b>		City <b>Coventry</b>	Zip <b>02816</b>
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name <b>EDWARD J. GOMES, ESQ.</b>		Address	
Address <b>91 FRIENDSHIP STREET</b>		City <b>PROVIDENCE</b>	Zip <b>02903-</b>

This report must be signed in ink by an authorized person pursuant to 7-16-66.



\* 1 1 1 7 2 4 \*

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.

*Scott S. McDermott*  
Signature of Authorized Person Date

**Scott S. McDermott, Member**  
Print or Type Name of Authorized Person

File Date 10-11-02  
Check No. 2012  
By: KMC

Filing Fee: \$50.00

To be filed annually between  
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

**LIMITED LIABILITY COMPANY**

ID Number DLLC 111724

Annual Report for the year 2001

1. The name of the limited liability company is:

Scotty's Landscaping, L.L.C.

2. The address of the principal office of the limited liability company is:

8 Manning Ct., Coventry, RI 02816

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: EDWARD J. GOMES, ESQ.

91 FRIENDSHIP STREET PROVIDENCE RI 02903-

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Scott S. McDermott, 8 Manning Ct., Coventry, RI 02816

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: landscaping

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated

9/20/01

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.



1 1 1 7 2 4

Scotty's Landscaping, L.L.C.

Exact Name of Limited Liability Company

By

Scott S. McDermott

Scott S. McDermott, Member

Title

FOR SECRETARY OF STATE USE ONLY  
File Date: 9-24-01  
Check No.: 1882  
By: [Signature]

Form No. 632  
Revised 01/99