
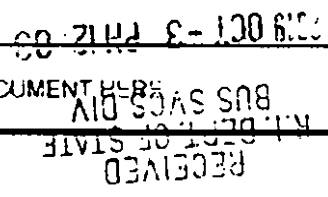




State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year: 2019**  
**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 <b>000014467</b>		2. Exact name of the Corporation <b>Stewart Nursery Co., Inc.</b>									
3. Principal Office Address <b>3714B Kingstown Road</b>			City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>						
4. NAICS Code <b>444220 / 424930</b>		6. Brief description of the character of business conducted in Rhode Island <b>Nursery: Grow and sell trees and shrubs to retail and wholesale customers. Product sold directly from fields on a dig to order basis.</b>									
5. State of Incorporation <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 <b>Kyle S. Stewart</b>			Vice-President Name <b>Robert S. Stewart Jr.</b>								
Street Address <b>3714B Kingstown Road</b>			Street Address <b>14 Blanchard Place, Apt 2</b>								
City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>	City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>						
Secretary Name <b>Kyle S. Stewart</b>			Treasurer Name <b>Kyle S. Stewart</b>								
Street Address <b>3714B Kingstown Road</b>			Street Address <b>3714B Kingstown Road</b>								
City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>	City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</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 <b>None</b>			Director Name <b>None</b>								
Street Address <b>None</b>			Street Address <b>None</b>								
City <b>None</b>	State <b>None</b>	Zip <b>None</b>	City <b>None</b>	State <b>None</b>	Zip <b>None</b>						
Director Name <b>None</b>			Director Name <b>None</b>								
Street Address <b>None</b>			Street Address <b>None</b>								
City <b>None</b>	State <b>None</b>	Zip <b>None</b>	City <b>None</b>	State <b>None</b>	Zip <b>None</b>						
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.  Changes require an additional filing.			10. Shares Issued								
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>400</td> <td>CNP</td> <td>0.0000</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	400	CNP	0.0000
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
400	CNP	0.0000									
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 <b>Kyle S. Stewart</b>				Date <b>10/1/2019</b>							
Signature of Authorized Representative 				<div style="text-align: center;">  </div>							

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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