



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.

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

2019 NOV -8 AM 11:06

1. Entity ID Number 000553612		2. Exact name of the Corporation SPORTS TURF SPECIALTIES, INC										
3. Principal Office Address 20 Kenneth Miner Drive		City Wrentham	State MA									
		Zip 02093										
4. NAICS Code 561730	6. Brief description of the character of business conducted in Rhode Island SPORTS FIELD CONSTRUCTION & MAINTENANCE											
5. State of Incorporation MA												
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>												
President Name Dennis Brolin		Vice-President Name										
Street Address 20 Kenneth Miner Dr.		Street Address										
City Wrentham	State MA	City	State									
	Zip 02093		Zip									
Secretary Name		Treasurer Name										
Street Address		Street Address										
City	State	City	State									
	Zip		Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>												
Director Name		Director Name										
Street Address		Street Address										
City	State	City	State									
	Zip		Zip									
Director Name		Director Name										
Street Address		Street Address										
City	State	City	State									
	Zip		Zip									
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>										
This information is currently of record in the Department of State.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>200,000</td> <td>CNP</td> <td>0.00</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	200,000	CNP	0.00			
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200,000	CNP	0.00										
Changes require an additional filing.												
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.												
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.												
Name of Authorized Representative Kathy Saleeba		Date 11/8/19										
Signature of Authorized Representative Kathy Saleeba		FILED										

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