

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

Corporations Division 100 North Main Streen Providence, RI 02903-13, 401.222 30

Matthew A. Brown, Secretary of State

FOR SECRETARY OF STATE USE ONLY

PROFIT CORPO		NNUAL REPOI	RT FOR THE YEA	R200	5	<del> </del>  : .	
(FORM MUST BE TYPED OR PI							
1. Corporate ID No.	2. Name of Corpora	tion			-		
117650	D. GORMAN	LANDSCAPING CO., IN	C			11 (11)	
3 Street Address Principal Busine	xs Office		City	State	2.ip	+++-	
22 Carpenter Stre	eet		Warwick	RI	028	86 '	
4 Business Phone No. 5. State of Incorporation		) ii		6. SIC Code			
(401) 736–5506 RHODE ISLAND 7 Brief Description of the Character of Business Conducted in Rhode Island			n. 2212				
TO ENGAGE IN THE							
8. NAMES AND ADDRESS	ES OF THE OFFICE	RS: ("X" BOX FOR AT	TACHMENT)     FILL IN	SPACES BEFORE USING	ATTACHMENT	rs -	
President Name			Vice President Name			•	
David J. Gorman			Harold D. Gorman				
Street Address	-		Street Address				
22 Carpenter Stre	eet		2 Dumont Farm Ro	oad			
City	State	<i>Σψ</i>	City	State	Zip	117	
Warwick	R1	02886	Coventry	RI	0281	6	
Secretary Name			Treasurer Name			1 1	
Melissa L. Gorma	n	<del></del> .	<del></del>	David J. Gorman			
Stro.: Address			• • • • • • • • • • • • • • • • • • • •	Street Address			
22 Carpenter Str	eet		22 Carpenter Street				
City	State	Zip	City	State	ZIp		
Warwick	RI	02886	Warwick	ŔI	0288	6	
9. NAMES AND ADDRESS	ES OF THE DIRECT	ORS: ("X" BOX FOR A	ATTACHMENT) 🗍 FILL II	N SPACES BEFORE USI:	NG ATTACHME	VTS ¦	
Director Name			Director Name				
Sirvet Address			Street Address	<del>-</del>			
City	State	Zip	City	State	Zip		
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Director Name	•••••••••••••••••••••••••••••••••••••••	•••••	Director Name	•••••••		······	
Street Address	<del>-</del>		Street Address	<u> </u>	<del></del>		
	<del> </del>	<u>.                                    </u>	:				
City	State	Zip	City	State	Zip		
10. SHARES AUTHORIZEI	 	 ??:4CUMENT\ []	11 CHARES ISSUED	TAVE BOY BOD ATTERIOR		네네.	
AUTHORIZED SHARES	O ( A BOA FOR A	TTACHMENT) [	ISSUED SHARES	"X" BOX FOR ATTACH	MENT) [		
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		<del></del>	1,000	Common	No Par	Value	
		<del> </del>					
This report must be	e signed in ink by e	ither the President, Vice	e President, Secretary, Assista	nt Secretary, Treasurer, 1	Receiver or Trus	itee	
1 181						: }	
						<b></b> '	
1181		U1 B)  } BB    8B		jury. I declare and affirm th			
1 .		$\neg$	contained herein use.	panying sencetules and state	ements, and that a	ii statemer	
File Date 1/14/0	<u></u>		b'	//			
File Date 1/17[8]	<u>م</u>	-		1	Thuary 13,		
Check No 2464			Signature of Officer		Da	ic	
Λ		-	DAVID J. GORMAN				

Print or Type Name of Officer



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

FOR SECRETARY OF STATE USE ONLY

Corporations Divisio 100 North Main Stre Providence, RI 02903-133

Matthew A. E.	lrown, Secretary	of State			401.222.304	
PROFIT CORPOR			RT FOR THE YEA	R200	)4	
FORM MUST BE TYPED OR PRIN	TED IN BLACK)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		, t		
t:;Chrjiopidie   D No	2. Name of Corpora	LANDSCAPING CO., INC	3.			
3 Street Address Principal Business C			City	State	Zip	
22 Carpenter Stree	et	Tea to	Warwick	RI	02886	
4 Bustness Phone No (401) 736–5506		5 State of Incorporation			6 SIC Code 2212	
7 Brief Description of the Character TO ENGAGE IN THE BU	,		<u> </u>			
B. NAMES AND ADDRESSES President Name			TACHMENT) [ FILL IN	SPACES BEFORE USIN	G ATTACHMENTS	
David J. Gorman			Harold D. Gorma	in		
Street Address			Street Address			
22 Carpenter Stree	State	Zip	2 Dumont Farm F	State	Zip	
Warwick Secretary Name	RI	02886	Coventry Treasurer Name	RI	02886	
David J. Gorman			David J. Gorman			
Street Address			Sirrer Address			
22 Carpenter Stree	T	<u></u>	22 Carpenter St			
Guy Warwick	State RI	<i>Σφ</i> 02886	Warwick	State RI	02886	
O. NAMES AND ADDRESSES  Ourcetor Name	OF THE DIRECT	TORS: ("X" BOX FOR A	TTACHMENT)   FILL II   Director Name	N SPACES BEFORE USI	NG ATTACHMENTS	
Street Address			Sirvei Address	<del></del>		
Cuy	State	Zip	City	State	Zip	
Director Name	·		Director Name	·····	······································	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
10. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR A	ATTACHMENT)	: 11. SHARES ISSUED ( ISSUED SHARES	("X" BOX FOR ATTACI	HMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
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This report must be s	igned in ink by o	either the President, Vice	President, Secretary, Assista	ant Secretary, Treasurer,	Receiver or Trustee	
<del>*</del> 1					hat I have examined this repo itements, and that all statemer	
File Date	24	_	A Total	//	01-22-03	
$\mathcal{I}$	`		Signature of Officer	6	Date	

DAVID J. GORMAN
Print or Type Name of Officer

PRESIDENT
Title of Officer



Edward S. Inman, III, Secretary of Sta Corporations Divisio 100 North Main Street, Providence, RI 02903-135 401-222-304

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation D. GORMAN LANDSCAPING CO., INC. 117650 3. Street Address Principal Business Office State Zip 22 Carpenter Street Warwick 02886 RI 4. Rusiness Phone No. 5. State of Incorporation (401) 736-5506 **RHODE ISLAND** 7. Bilef Description of the Character of Business Conducted in Rhode Island To engage in the business of landscaping and any other services related thereto; and any other lawful purpose. 8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name David J. Gorman Harold D. Gorman Street Address Street Address 22 Carpenter Street 30 Dogwood Drive, Unit 203 Zip Warwick RI 02886 West Warwick RI. ..... 02893 ..... Secretary Name Treasurer Name Melissa L. Gorman David J. Gorman Street Address 22 Carpenter Street 22 Carpenter Street Zip Warwick 02886 Warwick 02886 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Street Address Street Address City State City 210 State Zip Director Name Director Name Street Address Street Address City State Zip City State Zip 10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUED SHARES Number of Shares Class/Series Number of Shares Par Value Class/Series Par Value 1,000 COMM NO PAR VALUE 1,000 Common No par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste

	* 1 1 7 6 5 0 *
Tile Date:	1.00.03
heck No.:	1928
3y:	(P
	Y OF STATE USE ONLY

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 herely are true and correct.

Signature of Officer DAVID J. GÓRMAN

Print or Type Name of Officer

PRESIDENT

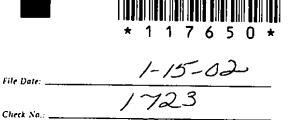


Edward S. Inman, III. Secretary of Stat Corporations Division 100 North Main Street, Providence, RI 02903-133! 401-222-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January	1-March 1 •	Filing Fee: \$50.00			P11 751 R1.A 1851 RU (110
FORM MUST BE TYPED IN BLA	CK)				1.53 1.67 1.67
1. Corporate ID No.	2. Name of Corpora	ntion	• • • • • • • • • • • • • • • • • • • •		
117650	D. GORMA	N LANDSCAPING CO., II	IC.		
3. Street Address Principal Business	Office	,	City	State	ZIp
22 Carpenter Str. 4. Business Phone No.	eet	S. State of Incorporation	Warwick	RI	02886 6. SIC Code
(401) 736-5506		RHODE ISLA	ND		2212
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services related	tnereto; an	d any other law	ful purpose  ACHMENT) FILL IN SPACES BE		
David J. Gorman Street Address			Harold D. Gorman		
22 Carpenter Stro	eet State	Zip	. 30 Dogwood Drive	, Unit 203	ZIp
Warwick Secretary Name	RI	02886	. West Warwick Treasurer Name	RI	02893
David J. Gorman Street Address			David J. Gorman Sueet Addiess		
22 Carpenter Stre			22 Carpenter Str	et	
•	State	Zip	City	State	ZIp
Warwick 9. NAMES AND ADDRESS Director Name	RI ES OF THE DIRI	02885 ECTORS (*x* box for at	Warwick TACHMENT) FILL IN SPACES B Director Name	RI EFORE USING ATTA	02886 CHMENTS
Street Address			Street Address		
Sity	State	Zip	СПу	State	Zip
Director Name			Director Name		
treet Address			Street Address		
7ay	State	Zip	Clly	State	Zip
O. SHARES AUTHORIZED UTHORIZED SHARES	(*X* BOX FOR ATTA	CHMENT)	11. SHARES ISSUED ("X" h	OX FOR ATTACHMENT)	,
lumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM NO PAR VAL	UE				
			1,000	Common	No par value
h.,					

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



this report, including any accompanying schedules and statements, and that all statements contained horein are true and correct. Signature of Officer Date

Under penalty of perfury, I declare and affirm that I have examined

DAVID J. GORMAN
Print or Type Name of Officer

**PRESIDENT** 

FOR SECRETARY OF STATE USE ONLY