

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

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

Matthew A. Brown, Secretary of State

FOR SECRETARY OF STATE USE ONLY

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_ 2005 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 WINDY HILL NURSERIES, INC 3. Street Address Principal Business Office 52 West Main Road <sup>Zip</sup> 02837 Cilittle Compton State RI 4. Business Phone No. 401/635-4888 5 State of Incorporation 6. SIC Code RHODE ISLAND 2212 7. Brief Description of the Character of Business Conducted in Rhode Island **LANDSCAPING** 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) | | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Gabriel Faria, Jr. Gabriel Faria, Jr. Siren Address 52 West Main Road 52 West Main Road Little Compton 02837 02837 Little Compton RI Secretary Naniz Treasurer Name Carolyn Faria Gabriel Faria, Jr. Street Address Street Address 52 West Main Road 52 West Main Road City State 02837 02837 Little Compton RI Little Compton RI 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Gabriel Faria, Jr. Carolyn Faria Street Address Sircei Address 52 West Main Road 52 West Main Road State RI 02837 RI 02837 Little Compton Little Compton Director Name Director Name Street Address Street Address City State Zip City State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Par Value Class/Sortes 100 Common None 200 COMM NO PAR VALUE This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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 File Date Signature of Officer Gabriel Faria, Jr. Print or Type Name of Officer President

Title of Officer



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

Matthew A. Brown, Secretary of State

FOR SECRETARY OF STATE USE ONLY

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

Form 630 Rev. 12/03

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR	2004
Filing Period: January 1 - March 1 • Filing Fee: \$50.00	

(FORM MUST BE TYPED OR PRIN	TED IN BLACK)	-				
1. Corporate 1D No.	2. Name of Corpo	pration	<del></del> ·			
18362	WINDY HI	LL NURSERIES, INC.		<u>; , , , , , , , , , , , , , , , , , , ,</u>		
3 Street Address Principal Business C 52 West Main Ro		,	Little Compton	State RI	Zip	
4. Business Phone No.	_	5. State of Incorporation		<del>.</del>	6. SIC Code	
401/635-4888  7. Brief Description of the Character	of Business Courts as	RHODE ISLAI	ND		2212	
LANDSCAPING						
8. NAMES AND ADDRESSES President Name	OF THE OFFIC	ERS: ("X" BOX FOR AT	TACHMENT) FILL IN SPA	CES BEFORE USIN	G ATTACHMENTS	
Gabriel Faria,	Jr.		Vice President Name Gabriel Faria,	Jr.		
Street Address 52 West Main Ro	ad		Street Address 52 West Main Ro	oad		
City	State	Zip	City	State	<sup>zip</sup> 02837	
Little Compton	RI	02837	Little Compton	RI		
Secretary Name Carolyn Faria			Treasurer Name Gabriel Faria, Jr.			
Street Address			Street Address	·	<del></del>	
52 West Main Ro	ad		52 West Main Road			
City	State RI	<i>Σφ</i> 02837	City Little Compton	State RI	<sup>2ip</sup> 02837	
Little Compton			ATTACHMENT)   FILL IN S	_		
Director Name	OI III DIREC	STORES. ( M. BOX TOR 7	Director Name	TACES BEFORE US	ING ATTACHMENTS	
Gabriel Faria, Jr.			Carolyn Faria			
Street Address			Street Address			
52 West Main Ro	<del></del>		52 West Main Road			
Little Compton	State RI	2φ 02837	<i>G</i> ny Little Compton	State RI	<sup>2φ</sup> 02837	
Director Name		•••••••	Director Name	•••••••		
Street Address		<u> </u>	Street Address			
37.60.7.00			Sirver Muuress			
City	State	Zip	City	State	Zip	
10. SHARES AUTHORIZED	("X" BÔX FÖR	ATTACHMENT)	11 SHARES ISSUED C'X	BÖX FOR ATTAC	HMENT)	
AUTHORIZED SHARES	`	, <u></u> , <u>.</u>	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
200 COMM NO DAD VALUE	<b>-</b>	-	100	Common	None	
200 COMM NO PAR VALU			100	Common		
			<u> </u>			
This report must be s	signed in ink by	either the President, Vice	President, Secretary, Assistant	Secretary, Treasurer,	Receiver or Trustee	
	1188: Ibiae iiie aiie	II B. (da)				
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			Linder penalty of period	. I dealers and offirm	that I have examined this report	
		[			atements, and that all statement	
1 - 7 : -	<u>,                                    </u>	<u>-                                    </u>	contained horein are tru		, / ,	
File Date	<u>U                                    </u>	<u> </u>	Jala !	I	1/22/04	
1776	<i>&gt;</i> ₹		Signature of Officer		Place	
Check No.		<del></del>	<u>Gabriel Far</u>	ia, Jr.		
Ву:			Print or Type Name of O			
<u> </u>			President			

Title of Officer

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT	CORPORATION	ANNUAL	REPORT	FOR	THE	YEAR	2003
Filing Period	: Ianuary 1-March I •	Filing Fee: \$50	.00				

Filing Period: January 1-March 1	•	Filing Fee: \$50.00	
FORM MUST BE TYPED OF PRINTED IN BLACK			

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1. Corporate ID No.

2 Name of Corporation

18362

WINDY HILL NURSERIES, INC.

3 Street Address Principal Business Office

MAIN West

Little Compton RI

2212

6. SIC Code

401-635-4888

L AND SCAPING

RHODE ISLAND

7. Brief Description of the Character of Business Conducted in Rhode Island

FILL IN SPACES BEFORE USING ATTACHMENTS

8. NAMES AND ADDRESSES OF THE OFFICERS (\*x\* BOX FOR ATTACHMENT)

FARIA, Jr.

52 West MAIN

Street Address

City

State

Zip

CArolyN

"West MAIN Rd.

, ttle Conpton RI

ddress West MAIN Rd. Little Compton RI

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

FARIA, JR. Abriel

52 West MAIN Rd

Little Compton

Street Address

Director Name

Street Address

gabriel FARIA, JR

CAROLYN FARIM

MAIN Rd.

52 West

hittle Conptin

City

City

State

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Por Value

ISSUED SHARES Number of Shares

Class/Series

100

No Par Valve

200 COMM NO PAR VALUE

COMMON

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



File Date:

FOR SECRETARY 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

Form 630 12/02

7. Brief Description of the Character of Business Conducted in Rhode Island

(FORM MUST BE TYPED IN BLACK)

3. Street Address Principal Business Office 52 West Main Road

401-635-4888

Landscaping

Gabriel Faria, Jr.

Little Compton

Carolyn Faria

FOR SECRETARY OF STATE USE ONLY

52 West Main Road

1. Corporate ID No.

18362

4. Business Phone No

President Name

Street Address

Secretary Name

Street Address

Edward S. Inman, III. Secre Corporation 100 North Main Street, Providence, RI 02903-1335 401-222-3040

RI

FILL IN SPACES BEFORE USING ATTACHMENTS

State RI

Christopher Faria

52 West Main Road

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

5. State of Incorporation

02837

RHODE ISLAND

Little Compton

Vice President Name

Cillittle Compton

Signature of Officer

Title of Officer ⇔ 3

Gabriel Faria, Jr.

Print or Type Name of Officer President

Gabriel Faria, Jr.

. Street Address

Treasurer Name

Street Address

02837

2212

02837

6. SIC Code

Zip

1/10/02

Form 630 12/01

Filling Period: January 1-March 1	•	Filing Fee: \$50.00
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2. Name of Corporation

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

RI

WINDY HILL NURSERIES, INC.

	32 West Main R	oad			52 West Mai	in Road	
City		State	Zip		City	State	Zip
	Little Compton	RI		02837	. Little Comp	ton RI	02837
	AMES AND ADDRESS	ES OF THE DIRE	CTORS (	"X" BOX FOR AT	TACHMENT) FILL IN SPA	CES BEFORE USING ATTA	CHMENTS
	Gabriel Faria						
Street	Address				Street Address		
<b>-</b> 1.	52 West Main R	•					
City	Little Compton	StateRI	Zip	02837	City	State	¹ Zip
Direct	or Name			• ••	Director Name		• • • • •
	Carolyn Faria						
Street	Address				Street Address		
<b></b>	52 West Main R				·		
City	Little Compton	State R.	T Zip	02837	City	State	Zip
	SHARES AUTHORIZED	("X" BOX FOR ATTA	CHMENT)		11. SHARES ISSUED	("X" BOX FOR ATTACHMENT)	•
Numb	er of Shares	Class/Series	Par V	alue	Number of Shares	Class/Series	Par Value
20	0 COMM NO PAR VALUE			·	100	Common	no par value
Γhis	report must be signe	<b>f in ink</b> by eith	er the Pr	esident, Vice	President, Secretary, As	sistant Secretary, Treasu	rer, Receiver or Trustee
	111111					·	
		REDI IDIOE IIIAE DIIKO IIEI				•	
	* 1	18362	*		• • •	perjury, I declare and affirm	
					•	ing any accompanying sche contained herein are true :	
<b>C</b> :1:	1-/	6-02			al D		ing contect,
riie	Date.				2.1.0	1/1	19/10/02

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

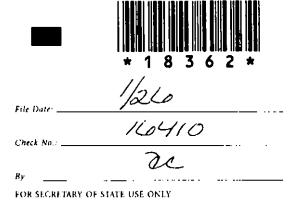
2 Name of Corporation

18362

WINDY HILL NURSERIES, INC.

3. Street Address Principa West	Main Ro	ấd		Little Compton	State RI	<sup>Zip</sup> 02837
4 Business Phone No.	401-63	35-4888	5 State of Incorporation RHODE ISLAND			6. SIC Code 2212
7 Brief Description of the	Character of a Landso		n Rhode Island			
8. NAMES AND A President Name		of the offi el Faria, J	CERS ("X" BOX FOR ATTACHE	MENT) FILL IN SPACES BEF Vice President Name Christopher		HMENTS
Street Address		ain Road		Street Addres 59 Peckham F	toad	:
Little Com Secretary Name Street Address	Caroly	RI m Faria ain Road	21p 02837	Little Compton Treasurer Nume Gabriel Far Street Address Old Main Ro		zip : 02837
Director Name	npton DDRESSE:	State RI	Zip 02837 ECTORS ("X" BOX FOR ATTAC	Cay Little Compton	State RI EFORE USING ATTA	02837 CCHMENTS
Street Address	Old Mai	•		Street Address Old Main Re		7
Little Co Director Name Street Address	ompton	State RI	<sup>Z<sub>1p</sub></sup> 02837	Little Compton  Director Name  Street Address	State RI	<sup>219</sup> 02837
Gity		State	Zip	City	State	Zip
10. SHARES AUTH	HORIZED (	("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED ("x" i	BOX FOR ATTACHMENT	·)
Number of Shares		Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 SHS NO	PAR CO	H		100	Common	w/out par value

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



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and Signature of Officer

Iffnt or Type Name of Officer

Title of Officer

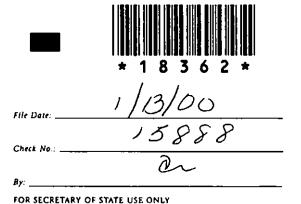
Form 630 12/00

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3046

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK) 2. Name of Corporation
WINDY HILL NURSERIES, INC. 3. Street Address Principal Business Office State West Main Road Little Compton RI 02837 4. Business Phone No. 5. State of Incorporation RHODE ISLAND 401-635-4888 7. Brief Description of the Character of Business Conducted in Rhode Island Landscaping 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Gabriel Faria, Jr. Christopher M. Faria Street Address Old Main Road 59 Peckham Road 02837 02837 Little Compton Little Compton Secretary Name Treasurer Name Carolyn Faria Gabriel Faria, JR. Street Address Street Address Old Main Road Old Main Road State State 02837 RI Little Compton Little Compton 02837 RI 9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Gabriel Faria, Jr. Carolyn Faria Street Address Street Address Old Main Road Old Main Road Little Compton RI 02837 Little Compton RΙ 02837 Director Name Director Name Street Address Street Address City State Zip Zip City State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Serles Number of Shares Class/Series Par Value 200 SHS NO PAR COM without 100

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



Under penalty of perjury, I declare and affi	rm that I have examined
this report, including any accompanying so	chedules and statements, an
that all statements contained herein are tru	ue and correct.
Splindich	1/7/00
Signalul of Officer	Bose
_Gabriel Faria, Ir	
Print or Type Name of Officer	

Common

par value

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

999

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PULASI	RI AD
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(FORM MUST BE TYPED IN BLAC	K)				
1. Corporate ID No. 18362	2 Name of Corpora WINDY HIL	L NURSERIES, INC.	· · · · · · · · · · · · · · · · · · ·	•••	
3. Street Address Principal Business O	ffice		City	State	Zip
4. Business Phone No. 401-635-		5 State of Incorporation RHODE ISLANI	Little Compton	RI	02837 6. SIC Code <b>2212</b>
7. Brief Description of the Character of	f Business Conducted i	n Rhode Island			
L	andscaping				
8. NAMES AND ADDRESS! President Name	ES OF THE OFFI	ICERS ("X" BOX FOR ATTACE	HMENT) FILL IN SPACES B	EFORE USING ATTA	CHMENTS
Gabriel Faria, Jr	•		Christopher M. F	Paria	
Old Main Road			59 Peckham Road		
City	State	Zıp	: City	State	
Little Compton,	RT	02837	Little Compton	RI	: 02837
Secretary Name		•	Treasurer Name	• • • • • • • • • • • • • • • • • • • •	** * *****
Carolyn Faria			⊝Gabriel Faria, Jr	•	
Street Address			Street Address	<del>-</del>	
Old Main Road		-	Old Main Road		<u></u>
City	State	Zip 02027	City	State	Zip 02027
Little Compton	RI	02837	Little Compton	RJ	02837
9. NAMES AND ADDRESS	ES OF THE DIRI	ECTORS ("X" BOX FOR ATT)	ACHMENT) FILL IN SPACES  : Director Name	BEFORE USING ATT	ACHMENTS
Gabriel Faria, Jr			Carolyn Faria		· · · · · · · · · · · · · · · · · · ·
Street Address	•		Street Address 1		
Old Main Road			Old Main Road		
City	State	Zip	City	State	··· : Z1p
Little Compton,	RI	02837	· Little Compton	RI	: 02837
Director Name		• • • • •	, Director Name		
Street Address			Street Address		·
Cuy	State	Zip	City · · · · - ·	State	Zip
10 SHADES ATTHORIZED	(EVE BOY FOR ATT	ACHARNITI	11 CUADEC ICCIED //	F BOV FOR ATTACHMEN	17.1
AUTHORIZED SHARES	CA BUATURAII.	ACHMEN1)	II. SHAKES ISSUED ("X	· BUA FUK ATTAUHMEN	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 SHS NO PAR CO		, 2			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
200 5H5 NO PAR CO	Ten.		100	Common	without par va
					!
					[ ] 
This report must be signe	<b>d in ink</b> by eitl	her the President Vice I	President Secretary Assis	tant Secretary Treas	surer. Receiver or Trustee
The report man or or or or	0, 010	The resident field		initi occietaj, ireas	and, meeting of musice
		<b>                                   </b>			
		1     <b> 1 </b>			

	* 1 8 3 6 2 *
File Date:	1-19-99
Check No.:	15444
Ву	AMF
FOR SECRETARY 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 herein are true and correct.

Signature of Officer

Gabriel Faria, Ir

President Title of Officer

---- 31 13 604

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

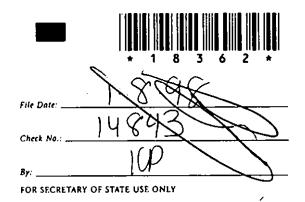
18362	WINDY HILL NO	JRSERIES, INC.			
3. Street Address Principal Business Of, Old Main	Road		Little Compton	State RI	<sup>∠ip</sup> 02837
4. Business Phone No. 401-635-4888		5. State of Incorporation RHODE ISLAND	-		6. SIC Code 2212
7. Brief Description of the Character of		de Island			
8. NAMES AND ADDRESSE President Name	Landscaping IS OF THE OFFICER	R\$ ("X" BOX FOR ATTACHE	IENT) Vice President Name		
Gabriel Faria, Jr.	•		Christopher M. Far	ria '	
Old Main Road	State	Zip	59 Peckham Road	State	Zip
Little Compton Secretary Name	RI	02837	Little Compton	RI	02837
Carolyn Faria Street Address		-	Gabriel Faria, Jr	•	
Old Main . Road	State	Zip	Old Main Road	State	Zip
Little Compton.	RI	02837	Little Compton	RI	02837
9. NAMES AND ADDRESSE Director Name Gabri'el Faria,		ORS ("X" BOX FOR ATTAC	• ,	~ <del>_</del>	02037
Street Address Old Main Road			Street Address		
City	State	Zip	City	State	Zip
Little Compton	RI	02837			
Director Name Carolyn Faria			Director Name		
Street Address Old Main Road			Street Address		
City	State	Zip	City	State	Zip
Little Compton	RI	02837			

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

ISSUED SHARES

Number of Shares

100



10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

Class/Series

Par Value

AUTHORIZED SHARES

200 SHS NO PAR COM

Number of Shares

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 havein are true and correct.

Class/Series

Common

Signature of Officer

Gabriel Faria, Jr.

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

Print or Type Name of Officer

President

Title of Officer

Par Value

without par va



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, Rt 02903-1335 401-277-3040

## PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

President Name

2. Name of Corporation

18362 3. Street Address Principal Business Office

WINDY HILL NURSERIES, INC.

West Main Road 4. Business Phone No. 401 635 4888

5. State of Incorporation

State Little Compton

State

RΙ

Rhode Island

02837 6. SIC Code

Zip

**RHODE ISLAND** 

2212

7. Brief Description of the Character of Business Conducted in Rhode Island

Landscaping

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

RI

Gabriel Faria, Jr. Street Address

Old Main Road

City

Little Compton

Secretary Name

Carolyn Faria

Street Address Old Main Road

Little Compton,

02837

02837

Zip

02837

Street Address Old Main Road

Carolyn Faria

Old Main Road

Little Compton

Street Address

Director Name

Street Address

City

59 Peckham Road

Little Compton

Vice President Name

Street Address

Treasurer Name

City

Little Compton

Gabriel Faria, Jr.

RI

State

RΙ

Christopher M. Faria

02837

02837.

ZID

02837.

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name

Director Name Gabriel Faria, Jr.

Street Address Old Main Road

Little Compton

Director Name

200 SHS NO PAR COM

Street Address

City

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES

Number of Shares

State

RΙ

Class/Series

Par Value

Zip

ISSUED SHARES

Number of Shares

Class/Series

State

Par Volue

Zip

100

Common

without Par Valu

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

FOR SECRETARY 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 herein arg true and correct

Signature of Officer

Gabriel Faria, Jr.

Print or Type Name of Officer President

1/13/97

Title of Officer

## **PROFIT CORPORATION ANNUAL REPORT**

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

8y: .

For Secretary of State Use Only

1. CORPORATE ID NO.	2. NAME OF CORPORATION	PLEASE TYPE OR F	PRINT IN BLACK INK.		
18362		HILL NURSERIES,	INC.		
3. STREET ADDRESS PRIVOPAL BUSINESS OF	i.	nunounted,	an an	STATE	Σην cob€
West Main F	Road	,	Little Compton	Rhode I	sland 02837
BUSINESS PHONE NO (401) 635-4	4888	5. STATE OF INCORPORATION RHODE ISI	LAND	2212	
BREF DESCRIPTION OF THE CHARACTER OF	BUSINESS CONDUCTED IN R-100E	CHAIZI	Landscaping		
	8. NA	MES AND ADDR	ESSES OF THE OF	FICERS.	
MESOEM NÀME Gabriel Faria, ITALLY ACORLES	Jr		var mesocin name Christopher M. I	Faria	
Old Main Road			59 Peckham Road		
Little Compton	STATE RI	<sup>26</sup> 02837	Little Compton	STATERI	<sup>28</sup> 200€02837
Carolyn Faria			Gabriel Faria, J	<del></del>	
Old Main Road	<del></del>	<del> </del>	old Main Road		· · · · · · · · · · · · · · · · · · ·
Little Compton	STATE RI	ZIP COOK 02837	Little Compton	STARI	<sup>20</sup> 02837
NECTOR NAME	9 N A	MES AND ADOR	ESSES OF THE DI	RECTORS	
Gabriel Faria	Jr.		Carolyn Faria		
Old Main Road	·		Old Main Road		
Little Compton	SIATE RI	02837	Little Compton	STATE	2º 002837
NAECTON NAME	::::::::::::::::::::::::::::::::::::::		DIRECTOR WARE		
STREFT ADDRESS		······································	STREET ADDRESS	<del></del>	<del></del>
ZIÝ	STATE	21P C00€	QIY	STATE	ZIP COOT.
	<del></del>	HARES AUTHOR	IZED AND'ISSUED		
NUMBER OF SHARES	AUTHORIZED SHARES CLASS / SERIES	PAR VALUE	MUMBER OF SHARES	ISSUED SHARES CLASS / SERVES	PAR VALUE
200 SHS NO	PAR COM		100	Common	Without Par Valu
ı					
			NED IN INK by either the		
Pres	ident, Vice Presid	dent, Secretary, Assist	tant Secretary, Treasurer,		
· 1	-		Under penalty of report, including all statements co	perjury, I declare an any accompanying s ntained herein are tr	id affirm that I have examined to checkles and statements, and the search correct.
File Date:	3341	,	Signature of Office	lu H	- K
Check No:	3341		Gabriel Fa		
	· 1/ ^		Print or Type Nan	ne of Officer	

President

1/11/96

## State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335

401-277-3040

ANNUAL REPORT

Please Type or Print File Annually - Jan. 1 - March 1

Filing Fee \$50.00

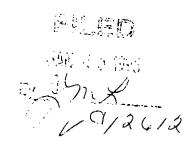
Make Checks Payable to: Secretary of State

## ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID:	Annual Report for the year:
. WINDY HILL NURSERI	IES, INC.
Name of Corporation:	
Business entity organized under the laws of the State of: Rhode_Isla	·
For foreign entity, address and telephone number of principal office:	[X] Business Corporation (See RIGL Chapter 7-1.1)
	[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
	Brief statement of the character of business conducted in Rhode Island:
Phone: ( )	
Address and telephone of the principal office of business entity in Rhode	Landscaping
Island (Provide street address - Not P.O. Box):	
West Main Road	
Little Compton, RI 02837	
Phone: ( 401) 635-4888	
Prione: (401) 033 1000	
THE NAMES	OF THE OFFICERS ARE:
PRESIDENT	TREET ADDRESS CITY/STATE ZIP CODE
Gabriel Faria, Jr. Old Main Road, Littl	
	TREET ADDRESS CHY/STATE ZIP CODE
Christopher M. Faria, 59 Peckham Road, L	
Carolyn Faria, Old Main Road, Little Com	PLOIT, KHOUE ISTAIL 02037  TREET ADDRESS CITY/STATE WP CODE
Gabriel Faria, Jr., Old Main Road, Littl	
	OF THE DIRECTORS ARE:
NAME SI	IREFT ADDRESS CITY/STATE ZIP CODE
Gabriel Faria, Jr., Old Main Road, Littl	
	TREET ADDRESS CITY/STATE ZIP CODE
Carolyn Faria, Old Main Road, Little Com	pton, Rhode Island 02837
NAME ST	FREET ADDRESS CITY/STATE ZIP CODE
NUMBER OF SHARES AUTHORIZED (Rider may be attached)	NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)
Number of Shares Class / Series	Number of Shares Class / Series
200 Common	100 Common
Without Par Value	Without Par Value
Date January 20 19 95 B	90.04.0
Date	Cabriel Faria Ir
l PI	DESTRUCTION OF OFFICER SIGNING
Form 31 1/95	ITLE OF OFFICER SIGNING
DESIGNATED REGISTERE	ED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed

GABRIEL FARIA, UR. OLD MAIN ROAD LITTLE COMPTON RI 02837



Filing Fee \$50.00 Payable to: Secretary of State

Form 31 1794

#### PLEASE TYPE or PRINT

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March

## State of Rhode Island and Providence Plantations Office of The Secretary of State

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID:	0018362	.0. 2.	Annual Repor	rt for th	le vear:	1994	
Name of Busines	ss Entity:		-		NURSERIES,	INC.	
Business entity org Federal Taxpayer I	dentification Numberand telephone number of principal office.	  !	{ x {	Busin Profe Limit cand m cations i	css Corporation (See sistematics (See Sessional Service Corpored Liability Company address of contrary he directed:	ration (See RIGL C (See RIGL 7-16) act person to whon	Chapter 7-5.1)
Phone: ( )		<del>-</del>	Old M Littl			02837	
Address and teleph	one of the principal office of business entity in cet address - Not P.O. Box).  West Main Road	<u>.</u>	Bnef state Lands	ment o	f the character of busing	ness conducted in I	Rhode Island:
	Little Compton, RI 028	<del>37</del> · - (			March <b>26</b>	<b>9,</b> 1974	<del></del>
Phone: ( 401	635-4888		Date of O  Date of Q	-	tion to do business in		oreign entity)
☐ CHIEF FXECUTIVE	OFFICER OR DARKSIDENT (Check Dark)	IAMES OF TA			CITY/STATE		ZIP COD
		ld Main	ď	Lit	tle Comptor	n, RI	02837
	Christopher M. Faria			Lit	tle Comptor	ı, RI	02837
CUSTODIAN OF REC	corpsor Kecretary (check One) Carolyn Faria	street Abb Old Main		Litt	CITY/STATE Le Compton,	RI	02837
CHIEF FINANCIAL C	OFFICER OR THE TREASURER (Check One) Gabriel Faria, Jr. 0	street add		Litt	CHY/STATE LIE Compton,		ZIP COD 02837
	. <u>-</u>	AMES OF TH	E DIRECTO		RE:		
SAME	Gabriel Faria, Jr. 0	old Main		ittl	CITYSTATE Le Compton,	RI	02837
NAME	Carolyn Faria 0	street abr	Road I.	itt	CHYSIAIF Le Compton,	RI	02837
NAMI.	- · · · · · · · · · · · · · · · · · · ·	STREET AD:	DRESS		CITY/STATE		ZIP COU
NUMBER OF SE	ARES AUTHÓRIZED (If Applicable)	·- · <del></del>	NUMBER O	F SHA	RES ISSUED AND O	UTSTANDING (I	f Applicable)
NUMBER	200	·	NUMBER	100	) )		
ÇLASS	Common		CLASS	Cor	nmon		
SERIES .		,	SERIES				
PAR VALUE OR WITHOUT PAR	Without Par Value		PAR VALU		Without Par	r Value	<u></u>
Date	January 31, 19 <sup>94</sup>	Ву:	. Ja	zla Ent	if fen		
	FILED		<u>Gabriel</u> Ype wame of offe -		<u>ia, Jr.                                    </u>	<u></u> .	
	FEB n 7 1994	THEEGEO	<u>Presid</u> er Ficersiening	11	<del></del>		

Filing Fee \$50.00	··· •·	11018 93.	To be filed annually between
≶ti	CORPOI 100 NOI	d and Frovidence Plants RATIONS DIVISION RATIONS STREET E, RHODE ISLAND 02903	January 1st and March 1st
Corporate ID	018362	Annual Report for the	year 1999
FIRST: The name	of the corporation is	WINDY HILL NURSER	RIES, INC.
SECOND: It is inco	orporated under the laws of	the State of Rhode Is	sland
THIRD: Character	of business, briefly stated, i	slandscaping	
FOURTH: If foreign	n corporation, address of its	s principal office	
FIFTH: Business ac	ddress in Rhode Island	West Main Road, Little	Compton, Rhode Island
SIXTH: Names and	d addresses of its directors a		(Attach rider if necessary) umber, street, zip code)
Gabriel Faria,	Jr. Director	Old Main Road, Little	Compton, RI 02837
Carolyn Faria	Director	Old Main Road, Little	Compton, RI 02837
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Director		
Gabriel Faria,	Jr. President	Old Main Road, Little	Compton, RI 02837
	Vice Pres	sident	
Carolyn Faria	Secretary	Old Main Road, Little (	Compton, RI 02837
Gabriel Faria,	Jr. Treasurer	Old Main Road, Little (	Compton, RI 02837
SEVENTH: Numbe	r of Shares authorized:		Par Vaiue or statement that
No. of Shares	Class	Scries	shares are without par value
200	Common	PAID	Without Par Value
EIGHTH: Number	of Shares issued:	JAN 2 6 1993	Par Value or statement that
No of Shares	Class	SEC WIOF STATE	shares are without par value
100	Common		Without Par Value
Dated January 22	<b>19</b> 93	WINDY HILL NURSERIES, (Name of Corporation)  By	Eriage
(Report must be	signed by an officer)	Gabriel Faria, Title President	

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 0290

	PROV	-100 NORTH MAIN STREET VIDENCE, RHODE ISLAND 029	0.3	100 10.
Corporate ID	0018362		ial Report for the year.	1992
FIRST: The r	name of the corporation is.	AIA	DY HILL NURSERI	ES, INC.
Second: It i	s incorporated under the la	aws of the State o	of Rhode Island	
THIRD: Chai	racter of business, briefly st	lated, is landscap	oing.	
Fourth: If f	oreign corporation, addres	es of its principal office		
Fifth: Busin	less address in Rhode Islan		i, Little Compton,	Rhode Island
	es and addresses of its dire	ctors and officers:	Address (including number, st	(Attach rider if necessary
Gabriel Faria	, Jr. Di	rector 01d Mai	in Road, Little Cor	npton, RI 02837
Carolyn Faria	Di	rector Old Mai	in Road, Little Cor	npton, RI 02837
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Di	rector		
Gabriel Faria	, Jr. Pro	esident Old Main	n Road, Little Comp	oton, RI 02837
************************************	Vio	ce President		
Carolyn Faria	Sec Sec.	cretary Old Mai	in Road, Little Cor	npton, RI 02837
Gabriel Faria	, Jr. Tro	easurer Old Mai	in Road, Little Cor	npton, RT 02837
SEVENTH: N	umber of Shares authorize	d:		Par Value or statement that
No. of Shares	Class	Sc	ries	shares are without par value
200	Common	РΑ	18	Without Par Value
			<b>3</b> 1092'	
Еібнтн: Nu	mber of Shares issued:			Par Value or statement that
No. of Shares	Class	SECY Of se	" STATE	shares are without par value
100	Common		W	ithout Par Value
March 11	19 <sup>92</sup>	WINDY HILL	NURSERIES, INC.	
Dated	19	(Name of Corporation		2
		Ву	about Tas	i Ja
		Gabrie	el Faria, Jr. ′	

(Report must be signed by an officer)

Title President

Form 31 1/85

#### To be filed annually between January 1st and March 1st

# State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID00	18362	Annual Report for the	year 1991
First: The name of	the corporation is	WINDY HILL NURSE	RIES, INC
SECOND: It is incorp	orated under the laws oft	he State of Rhode Island	
THIRD: Character of	business, briefly stated, is	landscaping	
FOURTH: If foreign c	corporation, address of its pr	incipal office	
	ress in Rhode Island Road, Little Compton,	Rhode Island	
SIXTH: Names and a	ddresses of its directors and		(Attach rider if necessary) imber, street, zip code)
Gabriel Faria, Jr.	Director	Old Main Road, Little	Compton, RI 02837
Carolyn Faria	Director	Old Main Road, Little	Compton, RI 02837
	Director		
Gabriel Faria, Jr.	President	Old Main Road, Little	Compton, RI 02837
	Vice Preside	nt	
Carolyn Faria	Secretary	Old Main Road, Little	Compton, RI 02837
Gabriel Faria, Jr.	Treasurer	Old Main Road, Little	Compton, RI 02837
SEVENTH: Number of	of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Senes	par value
200	Common	<i>`€`!</i>	Without Par Value
EIGHTH: Number of	Shares issued:	PANT COL	Par Value or statement that
No. of Shares	Class	Series (W)	shares are without par value
100	Common		Without Par Value
Dated February 1	19 91	WINDY HILL NURSERIES	, INC.
(Report must be si	E	Gabriel Faria, Jr. Fitle President	F.L

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0018362	******************************	Annual Report for the ye	ar <u>1990</u>
First:	The name of the corp	oration is	WINDY HILL NURSERIE	S, INC.
Second:	It is incorporated u	nder the laws of	the State of Rhode Island	
THIRD:	Character of business	s, briefly stated, is	landscaping	
Fourth:	If foreign corporati	on, address of its p	orincipal office	
<b>Г</b> ІГТН:	Business address in R	hode Island		
***************************************	West Main Road	. Little Compt	on, Rhode Island	
SIXTH:	Names and addresses	of its directors and	1 officers: Address (including numbe	(Attach rider if necessary) r, street, zip code)
Gabriel	Faria. Jr.	Director	Old Main Road Little Co	ompton, Rhode Island 02837
Carolyn	Faria	Director	Old Main Rd Little Comp	con Rhode Island 0283
	•	Director		
Gabriel	Faria, Jr.	President	Old Main Rd Little Comp	ton. Rhode Island 0283
		Vice Presid	ent	
Carolyn	Faria	Secretary	Old Main Rd Little Comp	Lon, Rhode Island 0283
Cabriel	Faria, Jr.	Treasurer	Old Main Rd Little Comp	Lon, Rhode Island 0283
Seventh	: Number of Shares	authorized:		Par Value or statement that
No. of Shi	ırcs	Class	Series	shares are without par value
200	C C	ommon		hout Par Value
F	N CO. :	ı	MAR 0 5 1990	.02/-1
Еіднтн:	Number of Shares i		SEC'Y. OF STATE	Par Value or statement that shares are without
No. of Sha		Class	series	parvalue hout Par Value
100	Col	mon	WIL	nout rai vaiue
DatedFeb	ruary1.5	<b>19</b> .90	WINDY HILL NURSERIES (Name of Corporation)  By	INC.
(Ro	port must be signed by ar	officer)	Gabriel Faria, Jr. Title President	

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

18362

Annual Report for the year

1989

FIRST: The name of the corporation is WINDY HILL NURSERIES, INC

SECOND: It is incorporated under the laws of

the State of Rhode Island

THIRD: Character of business, briefly stated, is

landscaping

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

West Main Road, Little Compton, Rhode Island

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Office Address Old Main Road Gabriel Faria, Jr. Little Compton, R.I. 02837 Director Old Main Road Carolyn Faria Director Little Compton, R.I. 02837 Director Old Main Road .Gabriel Faria, Jr. President Little Compton, R.I. 02837

Vice President

Old Main Road

...Carolyn Faria Secretary Little Compton, R.I. 02837

Old Main Road

Gabriel Faria, Jr. Treasurer Little Compton, R.I. 02837

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

Par Value or statement that shares are without par value No. of Shares Class Series

Without Par Value 200 Common

EIGHTH: Number of Shares issued:

No. of Shares

Class Series

Common

開保る

WINDY HILL NURSER Dated: 1989 February 15.

(Name of Corporation)

Par Value or statement that shares are without par value

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information, 277-3040

100

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903



Corporate ID	2	Annual Report for	the year
FIRST: The name of the corporation is		•	-
SECOND: It is in		Shade	· Island
THIRD: Charact			
FOURTH: If fore			······································
FIFTH: Business	address in Rhode Island		······································
West	Main Road, Little Cor	npton, Rhode Island	
SIXTH: Names a	and addresses of its directors and		(Attach rider if necessary)
Gabriel Fari	a, Jr. Director	Old Main Road Little Compto Old Main Road	n, Rhode Island
Carolyn Fari	aDirector		n, Rhode Island
	Director	Old Main Roal	······································
Gabriel Fari	a,JrPresident	Little Compto	
	Vice Presid		
CarolynFari	.a Secretary	Old Main Road Little Compto	on, Rhode Island
	a, Jr. Treasurer	Öld Main Road Little Compto	on, Rhode Island
Seventh: Num	ber of Shares authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without par value
100	Common	PAID	Without Par Value
EiGHTH: Numbe	er of Shares issued:	MAR UE 1888	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
100	Common		Without Par Value
DatedFebruar	cy10., 197.88.	WINDY HILL NU (Name of Corporation)	RSERIES, INC.
		By Carryn fa	via .
(Report must	be signed by an officer)	Title Secretary	

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 18362		Annual Report for the year	1987
FIRST: The name	of the corporation is WIN	DY HILL NURSERIES, INC.	
Second: It is inco	orporated under the laws of	Rhode Island	
THIRD: Character	of business, briefly stated, is	landscaping	
FOURTH: If foreig	n corporation, address of its p	principal office	
		mpton, Rhode Island	
SIXTH: Names and	d addresses of its directors an	d officers:	(Attach rider if necessary)
Name	Office	Old Mailiddra Sacrating number, st	• ·
Gabriel Faria	a, Jr. Director	Little Compton, Rhod	
Carolyn Fari		Old Main Road Little Compton, Rhod	le Island
	Director		
Gabriel Fari	=	Old Main Road Little Compton, Rhod	e Island
	Vice Presid	lent	•
Carolyn Fari	2	<sup>lent</sup> Old-Main-Road Little Compton, Rhod	le Teland
	Secretary	Old Main Road	
Gabriel Fari	a, Jr. Treasurer	Little Compton, Rhod	le Island
SEVENTH: Number	er of Shares authorized:		Par Value or statement that
No of Shares	Class	Series	shares are without par value
100	Common	With	out Par Value
		PAID	^
Еіднтн: Number	of Shares issued:	MAR 09 1987	Par Value or statement that
No. of Shares	Class	SEC'Y. OF STATE	shares are walker 1 9 100
100	Common		nout Par Value
DatedFebruary	.18, 1987	WINDY HILL NURSERIES, IN	RC.
	/	By Gabriel Faria, Tr.	1
(Report must be	e signed by an officer)	Title President	

(Report must be signed by an officer)

Form 31 1/85

Form 31 1/85

# State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 18362		Annual Report for th	e year1986
FIRST: The name of	of the corporation is WINI		······································
Second: It is income	rporated under the laws of	Rhode Island	
THIRD: Character	of business, briefly stated, is	landscaping	
FOURTH: If foreign	corporation, address of its p	rincipal office	
FIFTH: Business ad	dress in Rhode Island		
West Main Road	d, Little Compton, F	Rhode Island	
SIXTH: Names and	addresses of its directors and		(Attach rider if necessary) number, street, zip code) Road
Gabriel Faria,	Jr. Director		mpton, R. I. 02837
Carolyn Faria	Director	Little Co	mpton, R. I. 02837
	Director	Old Main	Road
Gabriel Faria,	Jr. President		mpton, R. I. 02837
	Vice Preside	ent	<del></del>
Carolyn Faria	Secretary	Old Main	mpton, R. I. 02837 Road
Gabriel Faria	Jr. Treasurer	Little Co	mpton, R. I. 02837
SEVENTH: Number	of Shares authorized:	Series	Par Value or statement that shares are without par value
200	Common		Without Par Value
Еіднтн: Number o	of Shares issued:		Par Value or statement that
No. of Shares	Class (7)	Scries	shares are without par value
100	Common		Without Par Value
Dated February	A XX m	WINDY HILL NURSERIE	S, INC.
MAR	27 ENT'O	By John J	Jan J
(Report must be:	signed by an officer)	Gaoriei Baria,	UI's

#### State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1985

FIRST: The name of the corporation is WINDY HILL NURSERIES, INC.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is landscaping

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) West Main Road, Little Compton, Rhode Island

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name Office Old Main Road Little Compton, R. I. 02837 Gabriel Faria, Jr. Director Old Main Road Little Compton, R. I. 02837 Carolyn Faria Director Director Old Main Road Gabriel Faria, Jr. Little Compton, R. I. 02837 President Vice President Old Main Road Carolyn Faria Little Compton, R. I. 02937 Secretary Old Main Road Little Compton, R. I. 02837 Gabriel Faria, Jr. Treasurer (If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

SEASIMITE. LIGHTSON OF SHALOW MANNEY

No. of Shares Class

Series

Par Value or statement that shares are without par value

200

Common

Without Par Value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value or statement that shares are without par value

100

Common

Without Par Value

Dated: January

1985 ក្ត

WINDY HILL NURSERIES, INC.

(Name of Corporation)

Gabriel Fari

Title President

(Report must be signed by an officer)

If the corporation has changed its gegistered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

#### State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is WINDY HILL NURSERIES, INC.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is landscaping

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this

address) West Main Road, Little Compton, Rhode Island

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

	Name	Office	Old Main Road			
Gabriel	Faria, Jr.	Director	Little Compton, Old Main Road	R.	I.	02837
Carolyn	Faria	Director	Little Compton,	R.	I.	02837
		Director	Old Main Road			
Gabriel	Faria, Jr.	President	Little Compton,	R.	I.	02837
		Vice President	Old Main Road			
Carolyn	Faria	Secretary	Little Compton, Old Main Road	R.	I.	02837
	Faria, Jr.		Little Compton,	R.	I.	02837

SEVENTH: Number of Shares authorized:

No. of Shares Class

Series

Par Value or statement that shares are without par value

200

Common

Without Par Value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value or statement that shares are without par value

100

Common

Without Par Value

Dated: January ...

05/14/85

WINDY HILL NURSERIES, INC.

By Salvel

Title President

(Report must be signed by an officer)

If the corporation has charged as registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT OF

WINDY HILL NURSERIES, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Windy Hill Nurseries, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: The address of its registered office in Rhode Island is
West Main Road, Little Compton, Rhode Island 02837
and the name of its registered agent in Rhode Island at such address is
Gabriel Faria, Jr.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is landscaping.

SIXTH: The names and respective addresses of its directors and officers are:

Name		Office	Old Main Road	Addres	S
Gabriel Faria,	Jr.	Director	Little Compton.	R.	. 02837
Carolyn Faria		Director	Old Main Road Little Compton,	а.	. 02837
		Director			
-		Director			
		Director			
•		Director	Old Main Road		
Gabriel Faria,	Jr.	President	Little Compton	, R.	I. 02837
		Vice President	Old Main Road		
Carolyn Faria		Secretary	Little Compton	, R.	I. 02837
Gabriel Faria,	Jr.	Treasurer	Old Main Road Little Compton	, R.	r. 02837

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

: , p				
Number of Shares	Class	3	Series	Par Value per Share or Statement that Shares are without Par Value
200	Common	63		Without Par Value
31 11-80		6300A1415.00BL	M	AR 21 1983

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common		Without Par Value

Dated February 18, ,19 83 WINDY HILL NURSERIES, INC.

ts President

#### State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

The name of the corporation is . Windy Hill Nurseries, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is landscaping .

FOURTH: If foreign corporation, address of its principal office

Business address in Rhode Island (blank reports will be mailed to this

West Main Road, Little Compton, Rhode Island 02837 address)

Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Office Name Old Main Road Address Little Compton, R. I. 02837 Gabriel Faria, Jr. Director Old Main Road Little Compton, R. I. 02837 Director Carolyn Faria Director Old Main Road Little Compton, R. I. 02837 Gabriel Faria, Jr. President Vice President Old Main Road Little Compton, R. I. 02837 Carolyn Faria Secretary Old Main Road Little Compton, R. I. 02837 Gabriel Faria, Jr. Treasurer (If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

Par Value or statement that shares are without

No. of Shares 200

Common

Class

Without Par Value

EIGHTH: Number of Shares issued:

Par Value or statement that shares are without par value

No. of Shares

Series

Series

Without Par Value -

100

Common

12

Dated: December 3,

1982

WINDY HILL NURSERIES, INC.

DEC 15 1982 (Name of Corporation)

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

of

#### WINDY HILL NURSERIES, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report: FIRST: The name of the corporation is Windy Hill Nurseries, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: The address of its registered office in Rhode Island is West Main Road, Little Compton, Rhode Island 02837

and the name of its registered agent in Rhode Island at such address is Gabriel Faria, Jr.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode landscaping. Island, briefly stated, is

SIXTH: The names and respective addresses of its directors and officers are:

	Name		Office	Old Main Road A	ddress
Gabriel	Faria,	Jr.	Director	Little Compton,	R. I. 02837
Carolyn	Faria		Director	Old Main Road Little Compton,	R. I. 02837
			Director		
			Director		
-			Director		
			Director	Old Main Road	
Gabriel	Faria,	Jr.	President	Old Main Road Little Compton,	R. I. 02837
			Vice President	Old Main Road	
Carolyn	Faria		Secretary	Little Compton.	R. I. 02837
Gabriel	Faria,	Jr.	Treasurer	Did Main Road Little Compton,	R. I. 02837

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is: Par Value per Share or Statement that

Number of Shares	Class	Series	Par Value
200	Common		Without Par Value

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common		Without Par Value

Dated February 18, ,1982

WINDY HILL NURSERIES, INC. (NAME OF CORPORATION)

Its President

farm 3

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

WINDY HILL NURSERIES, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is WINDY HILL NURSERIES, INC.

SECOND: It is incorporated under the laws of

RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is

OLD MAIN ROAD, LITTLE COMPTON, RHOME ISLAND 02837.

and the name of its registered agent in Rhode Island at such address is

GABRIEL FARIA, Jr.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is All types of Nursery Plants & Trees used for Landscaping

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Gabriel Paria, Jr.	Director	Old Main Road, Little Compton, R.I.
Carolyn Faria,	Director	Old Main Road, Little Compton, R.I.
	Director	
Gabriel Faria, Jr.	President	Old Main Road, Little Compton, R.I.
	Vice President	
Carolyn Faria	Secretary	Old Main Road, Little Compton, R.I.
Gabriel Paria, Jr.	Treasurer	Old Main Road, Little Compton, R.I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of		6	Par Value per Share or Statement that Shares are without
Shares _	Class	N <u>Series</u>	Par Value
		81	
200	Common	A	No Par Value
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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
200	Common	۸.	No Par Value

Dated June 11, ,19 81 Windy Hill Nurseries, Inc.

Carabyn Faria

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Filing fee: \$15.00

### State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

OF

#### Windy Hill Murseries, Inc.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Windy Hill Nurseries, Inc.

SECOND: It is incorporated under the laws of . Rhode Island

THIRD: The address of its registered office in Rhode Island is

Old Main Road, LittleCompton,R. 1.02837 . ..

and the name of its registered agent in Rhode Island at such address is

#### Gabriel Faria, Jr.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is The growing and selling of Nursery Stock, Plants

and trees.

Sixth: The names and respective addresses of its directors and officers are:

Name	Office	Address
Gabriel Paria, Jr.	Director	Old Main Road, Little Compton, R.I.
Carolyn Faria,	Director	Old Main Road, Little Compton, R.I.
Louise Paria	Director	Peckham Road, Little Compton, R.I.
	Director	
	Director	
	Director	
Gabriel Paria, Jr.	President	Old Main Road, LittleCompton,R.I.
	Vice President	
Carolyn Faria	Secretary	Old Main Road, Little Compton, R.I.
Gabriel Paria, Jr.	Treasurer	Old Main Road, Little Compton, R.I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	<u>C!ass</u>	Series	Par Value per Share or Statement that  5 Shares are without  Par Value
100	Common	A	81 .N.P.V.
o 31 :1:80			5124A1415.00

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Soares Class Series Par Value per Share or Statement that Shares are without Par Value

100 Common A N.P.V

Dated April 10, ,19 81 Windy Hill Nurseries, Inc. [NAME OF CORPORATION]

By away Jana

... Secretary

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

# State of Rhode Island and Providence Plantations office of the secretary of state

#### ANNUAL REPORT

		OF		
	WINDY HILL	NURSER	IES, INC.	
Pursuant to the pro amended, the undersigned FIRST: The name of	d corporation	hereby	submits the i	=
SECOND: It is incor	porated unde	r the la	ws of RHOD	E ISLAND
	•		in Rhode Islan R. 1. 02837	
and the name of its registe  Gabriel Far	_			dress is
FOURTH: If a foreig				ncipal office in the state or
And the second second				
Island, briefly stated, is	Covengage in Landscape des	all typing etc	es of nursery	ors and officers are:
Name		Office	A11 W. ( . B	Address
Gabriel Faria, Jr.	Direct	-		ad, Little Compton,R.I.02837
Carolyn Faria	Direct		Old Main Ro	ad, LittleCompton, R. I.02837
	Direct Direct			
	Direct			
	Direct			
Gabriel Faria, Jr.	Presid		Old MainRos	d, Little Compton,R. I.02837
none		resident		
Carolyn Faria	Secreta	-		ad, Little Compton,R. I.02837
Gabriel Faria, Jr.	Treasu	•		nd, Little Compton,R. I.02837
	gate number o	of shares	s which it has a rvalue,andseri	
Number of Shares	Class	10	Series	Par Value per Share or Statement that Shares are without Par Value
200	Common	80 I.	A	No Par Value
		8969A14···		SEP 22 <b>1980</b>

Form 21 8-79

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	Common	A.	No Par Value

Dated Sept. 15.

, 19 80

Windy Hill Nurseries, Inc.

(NAME OF CORPORATION)

Its Secretary

# State of Chude Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

		OF		
Wind	y Hill Nurs	eries, l	nc.	
amended, the undersigned	ed corporation	n hereb	y submits the fo	General Laws, 1956, as allowing annual report:
SECOND: It is inco	rporated un	der the	aws of Rhod	le Island
THIRD: The addres	s of its regist	ered offic	e in Rhode Island	is Old Main Road,
and the name of its registe	ered agent in	Rhode I	sland at such add	ress is
FOURTH: If a fore	ign corporati	ion, the a	ddress of its princ	cipal office in the state or
country under the laws of	which it is inc	corporate	ed is	
		,		
	ter of the b			ually engaged in Rhode
	• • •			
SIXTH: The names	and respecti	ve addres Office	sses of its director	s and officers are: Address
Gabriel Faria, Jr.	Dire	ctor	Old Main Roa	d, Little Compton,R. I
Carolyn Faria	Dire	ctor	Old Main Roa	d, Little Compton, R.I
Louise Faria	Dire	ctor	Old Main Ros	d, Little Compton,R.I.
	Dire	ctor		
	Dire			
		ctor		
Gabriel Faria, Jr.		ident		d, Little Compton,R.I.
nonė		Presider		
Carolyn Faria				d, Little Compton,R.I.
Gabriel Faria, Jr.		surer		d, Little Compton,R.I.
SEVENTH: The aggr by classes, par value of sha				thority to issue, itemized if any, within a class, is:
ny chaocoo, par tanàna ar ana			,,	Par Value per Share
Number of Shares	Class	<b>5</b> 2 <b>3</b>	Se <u>rie</u> s	or Statement that Shares are without Par Value
100	N.P.V.	79	Common	No Par Value
		8462A14		

MAY 26 1979

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
100	Common	Α.	NoPar Value

Dated April 2, , 1979

Windy Hill Nurseries, Inc.

(NAME OF CORPORATION)

Its Secretary

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

OF

Windy Hill	Nurseries, Inc.

	Thoy nill nutseties		
amended, the undersign	rovisions of Section ( ed corporation hereby of the corporation is	submits the following	g annual report:
į	or are corporation to		
SECOND: It is inco	prporated under the las		
	ess of its registered offi Road, Little Comptor		
and the name of its regis		sland at such address i	<b>.s</b>
	eign corporation, the a		
country under the laws o			
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Fifth: The chara	acter of the business i	in which it is actuall	v engaged in Rhode
Island, briefly stated, is			
O MI			
SIXTH: The names as	nd respective addresses		ficers are :
Gabriel Faria, Jr.	Director	Old Main Road, Li	ttle Compton,R.I.02837
Carolyn Faria	Director	Old Main Road, Li	ttle Compton,R.I.02837
James E. Holland		80 Main Road, Tive	erton.R. 1.02878
	Director		
	Director		
	Director		
Cabriel Faria, Jr.	President	Old Main Road, Lis	tle Compton,R.I.02837
none	Vice Presider	nt	
Carolyn Faria	Secretary		tle Compton,R.I.02837
Gabriel Faria, Jr.	•		tle Compton,R.I.02837
0			
SEVENTH: The agg by classes, par value of sha	gregate number of shar ares, shares without par	es which it has author r value, and series, if a	ity to issue, itemized ny, within a class, is:
			Par Value per Share or Statement that
Number of Shares	Class	Series	Shares are without Par Value
100	Common	<u> </u>	N.P.V.

JAN 2 1978

 ${\bf Eighth:} \quad {\bf The \ aggregate \ number \ of \ its \ issued \ shares, itemized \ by \ classes, \ par \ value \ of \ shares, shares \ without \ par \ value, \ and \ series, \ if \ any, \ within \ a \ class, \ is:$ 

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
100	Common	A	N.P.V.

Dated December 12 , 1977

Windy Hill Nurseries, Inc.

(NAME OF CORPORATION)

Ita Secretary

0-77 = 1

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

WINDY	HILL NURSERIES,	INC.
amended, the undersigned co	rporation hereby s	1.1-118 of the General Laws, 1956, as ubmits the following annual report: WINDY HILL NURSERIES, INC.
SECOND: It is incorpor	ated under the law:	S Of RHODE ISLAND
THIRD: The address of	its registered office	e in Rhode Island is
Old MAIN ROAD, LITTLE C and the name of its registered Mr. Gabriel Paria, Jr	agent in Rhode Isl	and at such address is
FOURTH: If a foreign country under the laws of whi		
	of the business in	which it is actually engaged in Rhode
FIFTH: The character Island, briefly stated, is La	of the business in indecepting 4 Nurse spective addresses of	which it is actually engaged in Rhode
FIFTH: The character Island, briefly stated, is La  SIXTH: The names and rev	of the business in indecaping & Nurse spective addresses of Office	of its directors and officers are:
FIFTH: The character Island, briefly stated, is La SIXTH: The names and re  Name Gabriel Paria, Jr.	of the business in andecaping & Nurse Spective addresses of Office Director	of its directors and officers are:  Address Old Main Road, Little Compton, R. I.02837
FIFTH: The character Island, briefly stated, is La SIXTH: The names and re  Name Gabriel Paria, Jr.	of the business in indecaping & Nurse spective addresses of Office	of its directors and officers are:  Address Old Main Road, Little Compton, R. I.02837 80 Main Road, Tiverton, R. I. 02878
FIFTH: The character Island, briefly stated, is La SIXTH: The names and re Name Gabriel Paria, Jr. Carolyn Paria	of the business in indecaping & Nurse Spective addresses of Office Director Director Director Director Director Director Director Director	of its directors and officers are:  Address Old Main Road, Little Compton, R. I.02837
FIFTH: The character Island, briefly stated, is La SIXTH: The names and re Name Gabriel Paria, Jr. Carolyn Paria James B. Holland, Jr.	of the business in andecaping & Nurse Spective addresses of Office Director	of its directors and officers are:  Address Old Main Road, Little Compton, R. I.02837 80 Main Road, Tiverton, R. I02878 Old Main Road, Little Compton, R. I02878
FIFTH: The character Island, briefly stated, is La SIXTH: The names and re Name Gabriel Paria, Jr. Carolyn Faria James B. Holland, Jr. Gabriel Paria, Jr.	of the business in indecaping & Nurse Spective addresses of Office Director Director Director Director Director Director Director President	of its directors and officers are:  Address Old Main Road, Little Compton, R. I.02837 80 Main Road, Tiverton, R. I02878 Old Main Road, Little Compton, R. I02878

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
100	Common	A	N.P.V.

DEC 20 1977

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Ser</u> ies	or Statement that Shares are without Par Value
100	Cemmon	A	N.P.V.

Dated Dec. 12,

, 19 77

Windy Hill Nurseries, Inc. (NAME OF CORPORATION)

Carolina Faria

Ita Secretary

20-77 56.

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

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#### WINDY HILL NURSERIES, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is

WINDY HILL NURSERIES, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is

OLD MAIN ROAD, LITTLE COMPTON, RHODE ISLAND 02837

and the name of its registered agent in Rhode Island at such address is GABRIEL FARIA, JR.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is NURSERY & LANDSCAPING

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
GABRIEL FARIA, JR.	Director	OLD MAIN ROAD, LITTLE COMPTON, R. I.
CAROLYN FARIA	Director	OLD MAIN ROAD, LITTLE COMPTON, R. I.
Louise Faria	Director	Peckham Road, Little Compton, R. I.
	Director	•
	Director	
	Director	
GABRIEL FARIA, JR.	President	OLD MAIN ROAD, LITTLE COMPTON, R. I.
	Vice President	
CAROLYN FARIA	Secretary	OLD MAIN ROAD, LITTLE COMPTON, R. I.
GABRIEL FARIA, JR.	Treasurer	OLD MAIN ROAD, LITTLE COMPTON, R. I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common	٨.	N. P. V.

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	<u>Class</u>	Series	or Statement that Shares are without Par Value
100	Common	Α.	N.P.V.

Dated Jan. 14,

, 1977

Windy Hill Nurseries, Inc.

1 Ct Sarry Jaca

Its Secretary

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## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

OF

WIN	DY HILL NURSE	RIES, INC.	
Pursuant to the provision amended, the undersigned corner First: The name of the	poration hereb	y submits the following windy HILL NURSE	ng annual report:
SECOND: It is incorpora	ated under the l	aws of RHODE ISL	AND
THIRD: The address of OLD MAIN ROAL		ffice in Rhode Island i TON, RHODE ISLAND O	
and the name of its registered	agent in Rhode		sis
FOURTH: If a foreign country under the laws of whi	_		
FIFTH: The character Island, briefly stated, is L	of the busines	s in which it is actu	
SIXTH: The names and I		esses of its directors a	ind officers are: Address
GABRIEL FARIA, JR. CAROLYN FARIA, JR.	Director Director		ITTLE COMPTON, R. IL 02837 ITTLE COMPTON, R. I. 02837
	Director Director		
	Director Director		
GABRIEL FARIA, JR.	President Vice Preside		LITTLE COMPTON, R. 1.02837
CAROLYN FARIA, JR.  GABRIEL FARIA, JR.	Secretary Treasurer	•	LITTLE COMPTON, R. I. 02837 LITTLE COMPTON, R. I. 02837
SEVENTH: The aggrega by classes, par value of shares,	te number of sh shares without	ares which it has auth par value, and series, i	f any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
100	Common	A	n.p.v.

SEP 27 1976



FORM 31 25M 11-7

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Sories	Par Value per Share or Statement that Shares are without Par Value
100	common	A	n.p.v.

Dated .... Sept. 15, ..., 19 76

Windy Hill Murseries, Inc. (NAME OF CORPORATION)

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