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

FILED

ANNUAL REPOR	RT FOR THE YEA	AR <u>2021</u>
Coi poi ation		

Filing Period: January 1 - March 1
Filing Fee: \$50.00
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Corporate ID No. 81889		BERRY FIELD ESTATES	INC.		
3. Street Address Principal Business Office 445 Warwick Industrial Drive		City Warwick	State RI	<sup>Zip</sup> 02886	
5. NAICS Code 531312 State of Incorporation Delaware					
6. Brief Description of the C Invest in real estate	2				
7. NAMES AND ADDR President Nome Jeffr <mark>ey A. Lara</mark> mee	ESSES OF THE OFF	TCERS: ("X" BOX FOR ATTA	CHMENT)	L IN SPACES BEFORE U	SING ATTACHMENTS
Street Address 445 Warwick Indus	trial Drive		Street Address		
Cuy Warwick	State RI	<sup>Zip</sup> 02886	Clly	State	Zip
Secretory Name Jeffrey A. Laramee		Treasurer Name Jeffrey A. Laramee			
Street Address 445 Warwick Industrial Drive		Street Address 445 Warwick Industrial Drive			
City Warwick	State R1	<sup>Z<sub>1</sub>p</sup> 02886	City Warwick	State RI	02886
8. NAMES AND ADDR Director Name  Jeffrey A. Laramee  Street Address	ESSES OF THE DIR	ECTORS: ("X" BOX FOR AT	TACHMENT) U FI Director Name Street Address	ILL IN SPACES BEFORE	USING ATTACHMENT
445 Warwick Indus	<u> </u>				
City Warwick Director Name	RI RI	02886	City Director Name	State	Zip
Street Address	<u></u>		Street Address		
Спу	State	Zip	City	State	Zip
9. SHĀRES AUTHORI	ZED: ("X" BOX FOR	RATTACHMENT)	( — · · ·	UED: ("X" BOX FOR ATT SECTION MUST BE COMPLETED	ACHMENT) _ 🗆
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of instruction sheet.		100 shares common stock of \$1.00 par value			
		<del></del>			
<ol> <li>This report must be rustee, this report must</li> </ol>	e executed on behalf t be executed on beh	of the corporation by an auth nalf of the corporation by the	orized representative receiver or trustee.	e. If the corporation is in t	he hands of a receiver o
ler penalty of perjury, I do tained herein are true an	eclare and affirm that I	have examined this report, inclu	iding any accompanyin	ng schedules and statements	, and that all statements
X'				01/29/200	2.1
gnature	r			pale	
effrey A. Laramee	<del></del>	<del></del>			
resident					
le	<del> </del>	<del></del>			

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040