RI SOS Filing Number: 202190954420 Date: 2/10/2021 4:00:00 PM

State of Rhode Island

Department of State - Business Services Division

FILED

FEB 10 2021\MP

80(03.05)

Annual Report for the year: Corporation

 → Filing period: January → Filing Fee: \$50.00 → Penalty: Additional \$25 		ot filed by April 1.			BY	0000	
1. Entity ID Number	2. Exact name of the Corporation						
8852	McGill Landscaping, Inc.						
3. Principal Office Address			City		State	17in	
P.O. Box 112			Barrington		RI	Zip 02806	
						02806	
4. NAICS Code	6. Brief desc	6. Brief description of the character of business conducted in Rhode Island					
561703	Nursery and	Nursery and landscaping business.					
5. State of Incorporation							
Rhode Island							
7. List ALL officers (names an	nd addresses)			Check	the box to i	ndicate an attachment	
President Name Robert E. McC	Vice-President Name						
Street Address P.O. Box 112	Street Address						
City Barrington	State RI	Zip 02806	City		State	Zip	
ecretary Name			Treasurer Name Robert E. McGill				
Street Address				s P.O. Box 112		 	
City	State	Zip	City Barring		State RI	Z _{IP} 02806	
8. List ALL directors (names a	and addresses)				the box to i	ndicate an attachment	
Director Name	-	_	Director Name			· · · · · · · · · · · ·	
Street Address			Street Address	ş			
City	State	Zip	City	City State		Zıp	
Director Name			Director Name				
Street Address	Street Address						
City	State	Zıp	-	<u> </u>	Tours."		
	Siele	219	City		State	Zıp	
9. Shares Authorized 10.		10. Shares Iss	es Issued Check		k the box to indicate an attachment		
This information is currently of record in the Department of State.		NUMBER O	NUMBER OF SHARES		CLASS/SERIES PAR VALUE		
Changes require an additional filing.		600 shs	600 shs		common no		
	······9·						
 This report must be execut trustee, this report must be ex 	ited on behalf of the	corporation by an	authorized repres	sentative. If the corp	oration is in t	the hands of a receiver or	
Under penalty of perjury, I d	leclare and affirm (that I have examin	ed this report, i	ncluding any accor	npanying s	chedules and	
<u> statements, a</u> nd that all stat	tements contained	herein are true ar	nd correct.				
Name of Authorized Representative Robert E. McGill					Date		
Signature of Authorized Repre	esentative					· · · · · · · · · · · · · · · · · · ·	

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov