RI SOS Filing Number: 202194826390 Date: 3/22/2021 2:53:00 PM

State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2020
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
R.I. DEPT. OF STATE
BUS SVCS DIV
2021 MAR 22 PM 2:51

1. Entity ID Number	2. Exact name of the Corporation		
1684885	Willow Brook Farm		
3. Principal Office Address	City	State	Zip
152 Delano Drive	N Kingstown	RI	02852
4. NAICS Code: 11521 0	6. Brief description of the character of business conducted in Rhode Island: Willow Brook Farm boards horses, and does Riding Instruction.		
5. State of Incorporation: RI			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
Dina Patnaud	Michael Patnaud
Street Address: 152 Delano Dr	Street Address: 152 Delano Dr
City: N Kingstown; State: RI; Zip: 02852	City: N Kingstown; State: RI; Zip: 02852
Secretary Name: N/A	Treasurer Name: N/A
Street Address	Street Address
City; State; Zip	City; State; Zip

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Director Name
N/A	N/A
Street Address	Street Address
City; State; Zip	City; State; Zip
Director Name	Director Name
Street Address	Street Address
City; State; Zip	City; State; Zip

9. Shares Authorized: 100	10. Shares Issued: 0 — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. **Changes require an additional filing.**	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			$1.00

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	Date
Dina Patnaud	3/2/21
Signature of Authorized Representative: Dina Patnaud	FILED MAR 22 2021 — 3/2/21

BY CN XZREC 2:53

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630 - Revised: 08/2020