



State of Rhode Island

Department of State - Business Services Division

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Annual Report for the year: **2021**
Corporation

- Filing period: January 1 - March 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entry ID Number 000093922		2. Exact name of the Corporation Middle-Acres Cranberry, Inc.			
3. Principal Office Address 1057 CRANDALL ROAD			City TIVERTON	State RI	Zip 02878
4. NAICS Code 111334		6. Brief description of the character of business conducted in Rhode Island AGRICULTURE - GROW CRANBERRIES			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name DANA LEBREUX			Vice-President Name		
Street Address 1057 CRANDALL ROAD			Street Address		
City TIVERTON	State RI	Zip 02878	City	State	Zip
Secretary Name			Treasurer Name		
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 DANA LEBREUX			Director Name		
Street Address 1057 CRANDALL ROAD			Street Address		
City TIVERTON	State RI	Zip 02878	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment ☐		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	Common	No Par
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 DANA LEBREUX				Date 10/5/2021	
Signature of Authorized Representative <i>Dana Lebreux</i> FILED					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2815
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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FORM 630 - Revised: 08/2020