



State of Rhode Island
Department of State - Business Services Division

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 R.I. DEPT. OF STATE
 BUS SVCS DIV
 2023 APR 20 P 2:04

Annual Report for the year: 2022
Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000017559		2. Exact name of the Corporation E.F.McGovern Landscaping, Inc				
3. Principal Office Address 122 Auburn Dr			City Charlestown	State RI	Zip 02813	
4. NAICS Code 561730		8. Brief description of the character of business conducted in Rhode Island Landscaping Services				
5. State of Incorporation RI						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
President Name Carol McGovern/ David McGovern			Vice-President Name			
Street Address 40 Tern Rd			Street Address			
City Narragansett	State RI	Zip 02882	City	State	Zip	
Secretary Name Kim McGovern			Treasurer Name			
Street Address 122 Auburn Dr			Street Address			
City Charlestown	State RI	Zip 02813	City	State	Zip	
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
Director Name			Director Name			
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		10. Shares Issued				Check the box to indicate an attachment <input type="checkbox"/>
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE	
		300				
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 Kim McGovern				Date 4/20/23		
Signature of Authorized Representative <i>Kim McGovern</i>				FILED APR 20 2023 BY: GRWSE 2:07		