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: 2020
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	2. Exact name of the Corporation		
000017559	E.F.McGovern Landscaping, Inc		
3. Principal Office Address	City	State	Zip
122 Auburn Dr	Charlestown	RI	02813
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island		
561730	Landscaping Services		
5. State of Incorporation			
RI			

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

President Name: Carol McGovern			Vice-President Name: David McGovern		
Street Address: 40 Tern Rd			Street Address: 122 Auburn Dr		
City: Narragansett	State: RI	Zip: 02882	City: Charlestown	State: RI	Zip: 02813
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 ☐

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 ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	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	Date
Kim McGovern	4/20/23
Signature of Authorized Representative: Kim McGovern	FILED

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

APR 20 2023
BY 2:05

FORM 630 - Revised: 2/2023