



State of Rhode Island  
Department of State - Business Services Division

FILED

FEB 12 2024

BY 5168

Annual Report for the year: 2024  
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. Entry ID Number <b>000035707</b>		2. Exact name of the Corporation <b>CONFREDA GARDENS, INC</b>	
3. Principal Office Address <b>108 Wood Cove Dr.</b>		City <b>COVENTRY</b>	State <b>RI</b>
		Zip <b>02816</b>	
4. NAICS Code <b>453220</b>	6. Brief description of the character of business conducted in Rhode Island <b>Operating a Retail business primarily engaged in the growing and sale of plants, shrubs and yard decorations.</b>		
5. State of Incorporation <b>RI</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>ANTHONY J. CONFREDA</b>		Vice-President Name <b>JAMES W. CONFREDA</b>	
Street Address <b>ONE WISTERIA DRIVE</b>		Street Address <b>110 WOOD COVE DRIVE</b>	
City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>COVENTRY</b>
			State <b>RI</b>
			Zip <b>02816</b>
Secretary Name <b>DOROTHY A. CONFREDA</b>		Treasurer Name <b>DOROTHY A. CONFREDA</b>	
Street Address <b>ONE WISTERIA DRIVE</b>		Street Address <b>ONE WISTERIA DRIVE</b>	
City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>COVENTRY</b>
			State <b>RI</b>
			Zip <b>02816</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>SAME AS ABOVE CONFREDA</b>		Director Name <b>James W. Confreda</b>	
Street Address <b>One Wisteria Drive</b>		Street Address <b>110 Wood Cove Dr.</b>	
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>Coventry</b>
			State <b>RI</b>
			Zip <b>02816</b>
Director Name <b>Dorothy A. Confreda</b>		Director Name	
Street Address <b>One Wisteria Drive</b>		Street Address	
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City
			State
			Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.			
NUMBER OF SHARES <b>1000</b>		CLASS/SERIES <b>CNP</b>	PAR VALUE <b>0.0000</b>
Changes require an additional filing.			
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.			
<b>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.</b>			
Name of Authorized Representative <b>Anna M. Confreda</b>			Date <b>Feb. 9, 2024</b>
Signature of Authorized Representative <b>ANNA M. CONFREDA, ASST. SECRETARY</b>			

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