



**State of Rhode Island  
Department of State - Business Services Division**

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.

**FILED STAMP**  
MAR 20 2024  
BY 4744

1. Entity ID Number <b>750261</b>		2. Exact name of the Corporation <b>Quidnick Greenhouses, Inc</b>				
3. Principal Office Address <b>417 Washington Street</b>			City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	
4. NAICS Code <b>453110</b>		6. Brief description of the character of business conducted in Rhode Island <b>Engaging in the sale of flowers and floral arrangements</b>				
5. State of Incorporation <b>RI</b>						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
President Name <b>Gregory Iannotti</b>			Vice-President Name <b>Vacant</b>			
Street Address <b>417 Washington Street</b>			Street Address			
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City	State	Zip	
Secretary Name <b>Gregory Iannotti</b>			Treasurer Name <b>Gregory Iannotti</b>			
Street Address <b>417 Washington Street</b>			Street Address <b>417 Washington Street</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)					Check the box to indicate an attachment <input type="checkbox"/>	
Director Name <b>Gregory Iannotti</b>			Director Name			
Street Address <b>417 Washington Street</b>			Street Address			
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	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	
		<b>600</b>		<b>Common</b>	<b>No par value</b>	
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>Gregory E. Iannotti</b>					Date <b>3/11/24</b>	
Signature of Authorized Representative <i>Gregory E. Iannotti</i>						

MAIL TO:  
Division of Business Services  
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