



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State
 Matthew A. Brown, Secretary of State

Corporations Division
 100 North Main Street
 Providence, RI 02903-1335
 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 39407		2. Name of Corporation MEADOW TREE FARM, INC.			
3. Street Address Principal Business Office 133 Old Tower Hill Road			City Wakefield	State RI	Zip 02879
4. Business Phone No. 789-0217		5. State of Incorporation RHODE ISLAND			6. SIC Code 5710
7. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David P. Symonds			Vice President Name George Sherman		
Street Address 1425 Newton Street			Street Address Curtis Corner Road		
City Key West	State FL	Zip 33040	City Wakefield	State RI	Zip 02879
Secretary Name Archibald B. Kenyon, Jr.			Treasurer Name Archibald B. Kenyon, Jr.		
Street Address 38 Fire Lane 5			Street Address 38 Fire Lane 5		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Neal B. Coffman			Director Name Richard A. Coffman		
Street Address 250 Hammond Pond Parkway, Apt. 5065			Street Address 105 Whippoorwill Circle		
City Chestnut Hill	State MA	Zip 02467	City Mashpee	State MA	Zip 02649
Director Name George Sherman			Director Name Archibald B. Kenyon, Jr.		
Street Address Curtis Corner Road			Street Address 38 Fire Lane 5		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			600	Common	No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 9 4 0 7 *

File Date 4/26/04
 Check No. 7204
 By: u.

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer [Signature] Date 4-22-04
 Archibald B. Kenyon, Jr.
 Print or Type Name of Officer
 Secretary
 Title of Officer

Additional Director:

David P. Symonds
1425 Newton Street
Key West, FL 33040