



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 150471		2. Exact name of the limited liability company WHITTINGTON ASSOCIATES, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island SALES REPRESENTATIVE ORGANIZATION			
5. Principal office address 265 PROSPECT LANE		City PORTSMOUTH	State RI Zip 02871		
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name THOMAS WHITTINGTON		Contact Title PRESIDENT/MEMBER			
Street Address 265 PROSPECT LANE		City PORTSMOUTH	State RI Zip 02871		
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name THOMAS WHITTINGTON			Address		
Address 265 PROSPECT LANE			City PORTSMOUTH	Zip 02871	

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

150471 FILED

OCT 17 2007

BY 039666

10:05

File Date	
Check No.	
By	
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.

Thomas Whittington 9/20/07
Signature of Authorized Person Date
THOMAS WHITTINGTON
Print or Type Name of Authorized Person