



OFFICE OF THE SECRETARY OF STATE
Office of the Secretary of State

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. 154006		2. Exact name of the limited liability company FAST G. T., LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island Rest.	
5. Principal office address 55 Clarkson Street		City Providence	State RI
		Zip 02908	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Edward J. Mongeon		Contact Title Member	
Street Address 104 Bertha Avenue		City Woonsocket	State RI
		Zip 02896	
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 EDWARD MONGEON		Manager Name Kenneth Mongeon	
Street Address 90 Bertha Ave		Street Address 7 Halliwell Blvd	
City Woon	State RI	City N-S.	State RI
Zip 02895		Zip 02876	
Manager Name JOHN T. Dupont		Manager Name	
Street Address ROUTE 7		Street Address	
City Burrville	State RI	City	State
Zip		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 ARAM P. JARRET, JR. ESQ.		Address	
Address 176 EDDIE DOWLING HIGHWAY		City NORTH SMITHFIELD	Zip 02896

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

Edward Mongeon 10/14/07
Signature of Authorized Person Date

EDWARD MONGEON
Print or Type Name of Authorized Person

File Date	FILED
Check No.	OCT 22 2007
By:	By S47
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