



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

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

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.

ANNUAL REPORT YEAR: 2010

1. ID No. 000164965

2. Exact Name of the Limited Liability Company Daniels AgroSciences, LLC

3. State of Formation

State: RI

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Provide consulting services to and manage intellectual properties; to acquire and invest in such interests in real or other personal property.

5. Principal Office Address

No. and Street: 56 GILBERT STUART DRIVE

City or Town: EAST GREENWICH

State: RI

Zip: 02818

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: RALPH DANIELS Contact Title:

No. and Street: 56 GILBERT STUART DRIVE

City or Town: EAST GREENWICH

State: RI

Zip: 02818

Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	RALPH S DANIELS	56 GILBERT STUART DRIVE EAST GREENWICH, RI 02818 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

RALPH DANIELS 56 GILBERT STUART DRIVE EAST GREENWICH , RI 02818

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

Signed this 26 Day of May, 2011 at 1:07:20 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By DEBBIE DANIELS
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2011 State of Rhode Island and Providence Plantations
All Rights Reserved