



**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:** 2011

**1. ID No.** 000505957

**2. Exact Name of the Limited Liability Company** Corporate Filing Solutions, LLC

**3. State of Formation**

State: MA

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

Corporate Formation, Document Retrieval and Registered Agent Services

**5. Principal Office Address**

No. and Street: 425 BOYLSTON STREET, 3RD FLOOR

City or Town: BOSTON

State: MA Zip: 02116 Country: USA

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

Contact Name: THOMAS ROSEDALE Contact Title: MANAGER

No. and Street: 425 BOYLSTON STREET, 3RD FLOOR

City or Town: BOSTON

State: MA Zip: 02116 Country: USA

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

| Title   | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|---------|------------------------------------------------|------------------------------------------------------------|
| MANAGER | THOMAS B. ROSEDALE                             | 425 BOYLSTON STREET, 3RD FLOOR<br>BOSTON, MA 02116 USA     |

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

NANCY ROSEDALE 94A NIPMUC TRAIL NORTH PROVIDENCE , RI 02904

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

**Signed this 22 Day of July, 2011 at 3:24:01 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 MALISSA DANIELS  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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