



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 2011

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. 127877		2. Exact name of the limited liability company S&P HOLDING, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island HOLD REAL ESTATE	
5. Principal office address 43 WEST RIVER STREET		City SEEKONK	State MA Zip 02771
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name SCOTT POISSON		Contact Title MANAGER	
Street Address 43 WEST RIVER STREET		City SEEKONK	State MA Zip 02771
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) <input type="checkbox"/>			
Manager Name SCOTT POISSON		Manager Name PAUL BANDILLI	
Street Address 43 WEST RIVER STREET		Street Address 33 KNIGHT ROAD	
City SEEKONK	State MA	City ATTLEBORO	State MA Zip 02703
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name VINCENT J. MITCHELL, ESQ.		Address	
Address 303 JEFFERSON BLVD		City WARWICK, RI	Zip 02888

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

127877

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.

Paul Bandilli 9/14/11
Signature of Authorized Person Date

PAUL BANDILLI

Print or Type Name of Authorized Person

FILED	
File Date	SEP 29 2011
Check No.	2011
By	
FOR SECRETARY OF STATE USE ONLY	