



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 504774		2. Exact name of the limited liability company PHILLIP'S PERSONALS, LLC			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island PRODUCT SALES - NOT DETERMINED			
5. Principal office address 121 SUCCOTASH RD		City WAKEFIELD	State RI	Zip 02879	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OF TITLE OF EACH PERSON Contact Name LAURA CONNEELY Contact Title LLC MEMBER					
Street Address 121 SUCCOTASH RD.		City WAKEFIELD	State RI	Zip 02879	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. DO NOT LIST MEMBERS (*X BOX FOR ATTACHMENT) <input type="checkbox"/>					
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					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

LAURA CONNEELY
121 SUCCOTASH RD.
WAKEFIELD, RI 02879

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File Date: **02/27/12**
Check No.: **165178**
By: **LAURA CONNEELY**
FOR SECRETARY OF STATE USE ONLY

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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.

LAURA CONNEELY 02/27/12
Signature of Authorized Person Date
LAURA CONNEELY 2/27/12
Print or Type Name of Authorized Person