



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 2010

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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)(3)) is subject to a penalty fee of \$25.00.

1. ID No. 147042		2. Exact name of the limited liability company A Gold Production LLC			
3. State of Formation RI		4. Brief description of the character of the business which is actually conducted in Rhode Island Marketing and production company including related internet services			
5. Principal office address 1 Thurber Street		City Warwick		State RI	Zip 02886
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Arthur Gold		Contact Title Partner			
Street Address 103 Peck Avenue		City Bristol		State RI	Zip 02809
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		Manager Name			
Street Address		Street Address			
City		State	Zip	City	State
Manager Name		Manager Name			
Street Address		Street Address			
City		State	Zip	City	State
8. RESIDENT AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11					

2012 APR 26 PM 3:09
SECRETARY OF STATE
CORPORATIONS DIV

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

147042

FILED

File Date	APR 26 2012
Check No.	109477 3:08
By:	AV
FOR SECRETARY OF STATE USE ONLY	

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.

AV **4/25/12**
Signature of Authorized Person Date
ARTHUR GOLDSMAN
Print or Type Name of Authorized Person