



**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: 2012

1. ID No. 000747951

2. Exact Name of the Limited Liability Company Black Mountain Systems, LLC

3. State of Formation

State: CA

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

Financial Software

5. Principal Office Address

No. and Street: 12520 HIGH BLUFF DRIVE, SUITE 340

City or Town: SAN DIEGO

State: CA Zip: 92130 Country: USA

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

Contact Name: Contact Title:

No. and Street: 50 PARK ROW WEST, SUITE 107

City or Town: PROVIDENCE

State: RI Zip: 02907 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	WAYNE ELPUS	1700 WEST PARK DRIVE, SUITE 160 WESTBORO, MA 01581 USA

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

BRYON WILLISTON 50 PARK ROW WEST, SUITE 107 PROVIDENCE , RI 02903

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

Signed this 14 Day of August, 2012 at 3:38:47 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 WAYNE ELPUS
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2012 State of Rhode Island and Providence Plantations
All Rights Reserved