



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 2012

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. 000118570		2. Exact name of the limited liability company RAYS BAIT + TACKLE			
3. State of Formation R.I		4. Brief description of the character of business conducted in Rhode Island SELLING OF FISHING BAIT + TACKLE			
5. Principal office address 287 ARNOLDS NECK DR		City WARWICK	State RI	Zip 02886	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON					
Con. KENNETH FERRARA		MANAGER			
Stre. 287 ARNOLDS NECK DR		WARWICK	RI	02886	
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 MARGUERITE FERRARA		Manager Name KENNETH LANDRY			
Street Address 33 GRAND VIEW AVE		Street Address 45 OLD SPRING RD			
City WARWICK	State RI	Zip 02886	City CRASTON	State RI	Zip 02920
Manager Name KENNETH FERRARA		Manager Name			
Street Address 45 OLD SPRING RD		Street Address			
City CRASTON	State RI	Zip 02920	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.					

FILED

File Date
 Check No.
 By
 FOR SECRETARY OF STATE USE ONLY

AUG 23 2012

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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.

Kenneth Ferrara 8-22-12
 Signature of Authorized Person Date

KENNETH FERRARA
 Print or Type Name of Authorized Person