



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.** 000535783

**2. Exact Name of the Limited Liability Company** First Student Management, LLC

**3. State of Formation**

State: DE

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

Payroll company for management personnel ass. with Laidlaw Transit, Inc

**5. Principal Office Address**

No. and Street: 600 VINE STREET  
SUITE 1400

City or Town: CINCINNATI State: OH Zip: 45202 Country: USA

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

Contact Name: Contact Title:

No. and Street: 600 VINE STREET  
SUITE 1400

City or Town: CINCINNATI State: OH Zip: 45202 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
MANAGER	MICHAEL L. PETRUCCI	705 CENTRAL AVE., SUITE 300 CINCINNATI, OH 45202 USA
MANAGER	SUSAN A. WHITTAKER	2221 EAST LAMAR BOULEVARD, SUITE 600 ARLINGTON, TX 76006 USA
MANAGER	BRIAN BEECHEM	600 VINE STREET, SUITE 1400 CINCINNATI, OH 45202 USA

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

CT CORPORATION SYSTEM 10 WEYBOSSET STREET 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 24 Day of September, 2012 at 7:12:44 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 MANDELINE HENDRICKS  
Signature of Authorized Person

Form No. 632  
Revised 09/07