



**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:** 2013

**1. ID No.** 000141001

**2. Exact Name of the Limited Liability Company** DuPont Filaments-America, LLC

**3. State of Formation**

State: DE

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

SALES OF FILAMENTS USED IN TOOTHBRUSH PAINTBRUSH COSMETIC INDUSTRIAL  
BRUSH APPLICATIONS

**5. Principal Office Address**

No. and Street: WASHINGTON WORKS BLDG 158 BOX  
1217

City or Town: PARKERSBURG

State: WV Zip: 26102 Country: USA

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

Contact Name: Contact Title:

No. and Street: 1007 MARKET STREET DI3039

City or Town: WILMINGTON

State: DE Zip: 19898-0001 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	THOMAS G VICHICH	1007 MARKET STREET WILMINGTON, DE 19898 USA
MANAGER	JOHN A SHANNON	1007 MARKET STREET WILMINGTON, DE 19898 USA
MANAGER	KAREN B RENNEMO	1007 MARKET STREET WILMINGTON, DE 19898 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 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

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

**Signed this 16 Day of September, 2013 at 2:43:45 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 KAREN B. RENNEMO  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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