



**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 2013**

**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. <b>789994</b>		2. Exact name of the limited liability company <b>MERCY ANIMAL HOSPITAL, LLC</b>			
3. State of Formation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>Animal Hospital</b>			
5. Principal office address <b>1395 New London Avenue</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02920</b>
Contact Name <b>Thomas McMillan</b>		Contact Title <b>Member</b>			
Street Address <b>1395 New London Avenue</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02920</b>
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip

This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.

**FILED**

**OCT 11 2013**

BY 15489

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.

Thomas McMillan  
Signature of Authorized Person

9/10/13  
Date

**Thomas McMillan**

Print or Type Name of Authorized Person