



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>705601</b>		2. Exact name of the limited liability company <b>HBD International, LLC</b>	
3. State of Formation <b>DELAWARE</b>		4. Brief description of the character of business conducted in Rhode Island <b>Consulting and servicing employers with employee wellness and safety programs.</b>	
5. Principal office address <b>2711 Centerville Road, Suite 400</b>		City <b>Wilmington</b>	State <b>DE</b>
		Zip <b>19803</b>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name <b>Andrew Stephenson</b>		Contact Title <b>Vice President</b>	
Street Address <b>PO Box 2512</b>		City <b>Providence</b>	State <b>RI</b>
		Zip <b>02906</b>	
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		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
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 \_\_\_\_\_

NOV 05 2013

Check No \_\_\_\_\_

By: \_\_\_\_\_

BY 1044

FOR SECRETARY OF STATE USE ONLY

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.

Andrew Stephenson  
Signature of Authorized Person

11/04/2013

Date

**Andrew Stephenson**

Print or Type Name of Authorized Person