



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. 000573611		2. Exact name of the limited liability company Rhode Island Home Care Physical Therapy, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Providing Physical, Occupational and Speech Therapy treatment (Evaluation, Therapy and Discharge) for home care patients in Rhode Island			
5. Principal office address 22 Horizon Dr		City Cranston	State RI	Zip 02921	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name ErZhuo Chen		Contact Title Clinical Director			
Street Address 22 Horizon Dr		City Cranston	State RI	Zip 02921	
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.					

2014 FEB 26 AM 11:20
 SECRETARY OF STATE
 CORPORATIONS DIV

FILED

FEB 26 2014

BY ErZhuo Chen

11:21

File Date _____

Check No _____

By: _____

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.

ErZhuo Chen

Signature of Authorized Person

02/25/2014

Date

ERZhuo Chen

Print or Type Name of Authorized Person