

# 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: 2014

1. **ID No.** 000116767

- 2. Exact Name of the Limited Liability Company Pyramid Network Services, LLC
- 3. State of Formation

State: NY

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

#### TELECOMMUNICATIONS CONSULTANT AND CONSTRUCTION MANAGER

5. Principal Office Address

No. and Street: <u>6519 TOWPATH ROAD</u>

City or Town: EAST SYRACUSE State: NY Zip: 13057 Country: USA

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

Contact Name: SCOTT MCCABE Contact Title: VP OF FINANCE & CORP OPERATIONS

No. and Street: 6519 TOWPATH ROAD

City or Town: <u>EAST SYRACUSE</u> State: <u>NY</u> Zip: <u>13057</u> Country: <u>USA</u>

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

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	RONALD J BRUNOZZI	8837 LOMBARDI DRIVE CICERO, NY 13039 US
MANAGER	JOSEPH T SCUDERI	11 REIS CIRCLE FAYETTEVILLE, NY 13066- USA
MANAGER	JOSEPH R SCUDERI	2709 HARD SCRABBLE POINT ROAD 'SKANEATELES,, NY 13152 US
MANAGER	JOHN L CLARK	7811 CHEVIOT COURT FAYETTEVILLE, NY 13066 US
MANAGER	CYRUS W WEICHERT	81 EAST GENESEE STREET

'SKANEATELES, NY 13152 US

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

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

**Signed this 5 Day of September, 2014 at 2:31:31 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 **SCOTT MCABE**

Signature of Authorized Person

Form No. 632 Revised 09/07

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