



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.** 000403029

**2. Exact Name of the Limited Liability Company** The Remi Group LLC

**3. State of Formation**

State: NC

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

NONE

**5. Principal Office Address**

No. and Street: 11325 N. COMMUNITY HOUSE ROAD

City or Town: CHARLOTTE

State: NC Zip: 28277 Country: USA

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

Contact Name: BRIAN LANDON Contact Title: DIRECTOR OF HUMAN RESOURCES

No. and Street: 11325 N. COMMUNITY HOUSE ROAD, SUITE 300

City or Town: CHARLOTTE

State: NC Zip: 28277 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	DANIEL SCHUSTER	11325 N. COMMUNITY HOUSE RD., SUITE 300 CHARLOTTE, NC 28277 US
MANAGER	BRENT HOWISON	11325 N. COMMUNITY HOUSE RD., SUITE 300 CHARLOTTE, NC 28277 US
MANAGER	ROBERT FLEISCHACKER	11325 N. COMMUNITY HOUSE RD., SUITE 300 CHARLOTTE, NC 28277 US

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER**

**Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

NATIONAL CORPORATE RESEARCH, LTD. 222 JEFFERSON BOULEVARD WARWICK , RI 02888

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

**Signed this 21 Day of October, 2014 at 4:20:41 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 BRIAN LANDON  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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