



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 **2014**

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. 129558		2. Exact name of the limited liability company St. Onge Services, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Excavation and hammering.			
5. Principal office address 300 Front Street		City Lincoln		State RI	Zip 02865
6. MAILING ADDRESS OF THE LIMITED LIABILITY COMPANY AND NAME OF THE CONTACT PERSON					
Contact Name Christopher St. Onge		Contact Title Member			
Street Address 27 Tourtellot Hill Road		City Chepachet		State RI	Zip 02814
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 None		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

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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.

Christopher St. Onge — 11/3/2014
Signature of Authorized Person Date

Christopher St. Onge, Member

Print or Type Name of Authorized Person