



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. 130417		2. Exact name of the limited liability company Ronald T. Larviere, LLC			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island Real Estate Development			
5. Principal office address 651 Cottage Street		City Pawtucket	State RI	Zip 02861	
Contact Name Ronald T. Larviere		Contact Title Manager			
Street Address 651 Cottage Street		City Pawtucket	State RI	Zip 02861	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. DO NOT LIST MEMBERS. (SEE BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name Ronald T. Larviere		Manager Name			
Street Address 651 Cottage Street		Street Address			
City Pawtucket	State RI	Zip 02861	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

NOV 05 2014

(Handwritten signature)

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.

(Handwritten signature) 11/6/14
 Signature of Authorized Person Date

Ronald T. Larviere

Print or Type Name of Authorized Person