



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. 111477		2. Exact name of the limited liability company Dynamic Enterprises, LLC			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island Construction and remodeling of residential and commercial buildings			
5. Principal office address 37 J. Lark Industrial Parkway			City Smithfield	State RI	Zip 02828
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Anthony Derensis			Contact Title Member		
Street Address 3 Belevue Avenue			City Johnston	State RI	Zip 02828
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"/>					
Name Anthony J. Derensis			Manager Name Anthony J. Derensis		
Street Address 3 Belevue Avenue			Street Address 3 Belevue Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
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

DEC 08 2014

BY 50715459

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.

Anthony Derensis 12-1-14
 Signature of Authorized Person Date

Anthony Derensis
 Print or Type Name of Authorized Person