



**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. 000736952

2. Exact Name of the Limited Liability Company North Main Builders LLC

3. State of Formation

State: RI

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

General Contractor

5. Principal Office Address

No. and Street: 87 GLENBROOK RD

1ST FLOOR

City or Town: STAMFORD

State: CT

Zip: 06902

Country: USA

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

Contact Name: CHRISTOPHER MALLOY Contact Title: PARTNER

No. and Street: 87 GLENBROOK RD.

1ST FLOOR

City or Town: STAMFORD

State: CT

Zip: 06902

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	CHRISTOPHER G MALLOY	15 STAMFORD AVE STAMFORD, CT 06902 USA
MANAGER	JOHN E MALLOY	612 HOPE ST. APT C STAMFORD, CT 06902 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

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

MICHAEL VAN BUREN 60 PROSPECT LANE PORTSMOUTH , RI 02871

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

Signed this 10 Day of December, 2014 at 4:40:32 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 CHRISTOPHER MALLOY
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2014 State of Rhode Island and Providence Plantations
All Rights Reserved