



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 2015

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. 110659		2. Exact name of the limited liability company HANDFIELD DAIRY EQUIPMENT, LLC			
3. State of Formation CONNECTICUT		4. Brief description of the character of business conducted in Rhode Island DAIRY FARM EQUIPMENT/& SUPPLIES SALES AND SERVICE			
5. Principal office address 789 ROUTE 32		City NORTH FRANKLIN	State CT	Zip 06254	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name RICHARD A. HANDFIELD		Contact Title PRESIDENT			
Street Address 789 ROUTE 32		City NORTH FRANKLIN	State CT	Zip 06254	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name		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

SEP 30 2015

BY

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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.

Richard A. Handfield
Signature of Authorized Person

09/23/2015

Date

RICHARD A. HANDFIELD

Print or Type Name of Authorized Person

File Date

Check No

By

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