



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

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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. 135159		2. Exact name of the limited liability company Quaker Lane Marketing, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of business conducted in Rhode Island MARKETING			
5. Principal office address 4019 QUAKER LANE		City NORTH KINGSTOWN		State RI	Zip 02852
Contact Name MICHAEL S. BESTWICK		Contact Title MEMBER			
Street Address 4019 QUAKER LANE		City NORTH KINGSTOWN		State RI	Zip 02852
LIST ALL MANAGERS, NAMES AND ADDRESSES OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. DO NOT LIST MEMBERS. POINT OF 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
A 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

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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.

Signature of Authorized Person

Date

MICHAEL S. BESTWICK, MEMBER

Print or Type Name of Authorized Person