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.	2. Exact name of the limited liability company
000164015	Desrosiers Excavating/Landscaping, LLC.
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island
RI	Excavating / landscaping

5. Principal office address	City	State	Zip
1077 East Road	Tiverton	RI	02878

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON

Contact Name	Contact Title
Paul E. Desrosiers	Owner

Street Address	City	State	Zip
P.O. Box 125	Adamsville	RI	02801

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
Paul E. Desrosiers	
Street Address	**Street Address**
P.O. Box 125	
City / State / Zip: Adamsville / RI / 02801	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.

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2016 FEB 17 PM 12:30

12:35pm
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FEB 17 2016
By 267833
KM

File Date
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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.

Paul E Desrosiers 2/17/16
Signature of Authorized Person — Date

Paul E Desrosiers
Print or Type Name of Authorized Person

Form No. 632
Revised: 01/2012