



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 2013

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. 000795192		2. Exact name of the limited liability company Fairborn Northeast LLC			
3. State of Formation NH		4. Brief description of the character of business conducted in Rhode Island Service Overhead Doors and Dock Levelers			
5. Principal office address One Corporate Park Suite 8		City Derry	State NH	Zip 03038	
Contact Name Michelle Gehrishch		Contact Title Office Manager			
Street Address Same as Above		City	State	Zip	
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"/>					
Manager Name Michael Rose		Manager Name			
Street Address One Corporate Park Drive Suite 8		Street Address			
City Derry	State NH	Zip 03038	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.					

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 SECRETARY OF STATE
 CORPORATIONS DIV.
 2016 APR 15 AM 10

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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.

Michael Rose
 Signature of Authorized Person

4/14/16
 Date

Michael Rose
 Print or Type Name of Authorized Person