

State of Rhode and and Providence Plantations Department of State - Business Services Division

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RECEIVED SECRETARY OF STATE CORPORATIONS DIV

2016 MAY -5 PM 2: 30

Limited Liability Company Annual Report for the year:

Filing period: September 1 - November 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL R ._T IN A \$25.00 PENALTY FEE.

1. Entity ID Number 2. Exact name of the Limited Liability Company						
000486362	Belcher Electric 111.					
3. State of Formation	4. Brief descrip	otion of the charac	cter of business conducted in Rho	de Island		
RI	RI Electrical + Remodling Principal Office Address City State Zip					
5. Principal Office Address		医面线性病炎 机	City	State	Zip	
42 Pearl Street			Woonsocket	RZ	02895	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Scotty Belcher			Contact Title O Wner			
Street Address 42 Pearl Street			City Wounsocket	State K 1	Zip 028 75	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name .			Manager Name			
Street Address			Street Address			
C" 1	Statr 7	Zin	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zíp	City	State	Zip	
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8. Resident Agent in Rhode Islan	id This information	is currently of reco	rd in the Department of State. Change	s require filing For	n 642	
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements declared herein are true and correct.						
Name of Authorized Person Say Bullin				Date 5/5/	12016	
Signature of Authorized Person						
Scotty be cher SIGN DOCUMENT HERE						

FILED

MAY 05.2016

Form No. 632 Revised: 2016