

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

148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

Limited Liability Company Annual Report for the year:

Filing period: September 1 - November 1 2016 MAY - 9 PM 2: 11 Filing Fee: \$50.00 \*FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

Entity ID Number     Z. Exact name of the Limited Liability Company					
876777	TOWN HELL LANDS D. T. (10				
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island				
D.I. Bowling entertainment					
5. Principal Office Address			City	State	Zip
1463 Atward Ave			Johnston	RI.	02815
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Kicher & Fraggell.			Contact Title PreSicul T		
Street Address 1463 Attracel Ave			city Johnstan	State I -	Zip 1919
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		
City	State	Zip	City	State	Zip
Manager Name	<u></u>	<del></del>	Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
8. Resident Agent in Rhode Island This information is currently of record in the Department of State. Changes require filing Form 642.					
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.					
Name of Authorized Person					Physician Company (1996) (1996) (1997) (1996
Kichard Frankli,				5/9//	16
Signature of Authorized Person SIGN DOCUMENT HERE					

MAY 0 9 2016

Form No. 632 Revised: 2016