



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. 329458		2. Exact name of the limited liability company S.A.P. Woodworks, LLC			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island Construction			
5. Principal office address 46 Smallpox Trail		City West Kingston	State RI	Zip 02892	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Tricia Fiore		Contact Title CPA			
Street Address 56 Sherwood Drive		City Westerly	State RI	Zip 02891	
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 Scott A. Parman		Manager Name			
Street Address 334 Shumankanic Hill Rd		Street Address			
City Charlestown	State RI	Zip 02813	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.					

12:59
FILED

MAY 31 2016

BY **OPB 275685**

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2016 MAY 31 PM 12:58

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.

Signature of Authorized Person **Scott A. Parman** Date **12/09/2015**

Scott A. Parman
 Print or Type Name of Authorized Person