



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

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**Annual Report for the year:** 2015  
**Limited Liability Company**

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <b>000138583</b>		2. Exact name of the Limited Liability Company <b>David Dinucci Builders LLC</b>			
3. State of Formation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>Construction</b>			
5. Principal Office Address <b>138D Old Mill Rd</b>			City <b>Charlestown</b>	State <b>RI</b>	Zip <b>02813</b>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>David Dinucci</b>			Contact Title <b>Member</b>		
Street Address <b>138D Old Mill Rd</b>			City <b>Charlestown</b>	State <b>RI</b>	Zip <b>02813</b>
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			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
8. Resident Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person <i>David Dinucci</i>				Date <i>7/26/16</i>	
Signature of Authorized Person <i>David Dinucci</i>					

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**1055 FILED**  
**AUG 03 2016**  
 BY *JPB 280554*

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