



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. ID No. 001296446

2. Exact Name of the Limited Liability Company Fulcimus, LLC

3. State of Formation

State: MA

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 54

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

TO ENGAGE IN TECHNOLOGY CONSULTING, CUSTOM SOFTWARE DEVELOPMENT,
AND ANY
OTHER ACTIVITIES ALLOWABLE BY LAW.

5. Principal Office Address

No. and Street: 41 SALCOMBE STREET

City or Town: BOSTON

State: MA

Zip: 02125

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: ORLAND L. CAMPBELL Contact Title: MANAGING PARTNER

No. and Street: PO BOX 52040

City or Town: BOSTON

State: MA

Zip: 02205

Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	THEODORE ALEXANDER STOCKER	41 SALCOMBE STREET

		BOSTON, MA 02125 USA
MANAGER	ORLAND LONG CAMPBELL	216 EAST STREET UPTON, MA 01568 USA
MANAGER	YIH JONG CHEN	19 EDWARD ROAD WATERTOWN, MA 02472 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

INCorp SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 12 Day of September, 2016 at 12:59:57 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By ORLAND LONG CAMPBELL
Signature of Authorized Person

Form No. 632
Revised 09/07

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