State of Rhode Island and Providence Plantations  Department of State - Business Services Division
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Annual Report for the year: 2016 **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.

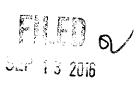
1. Entity ID Number 121699	2. Exact name of the Limited Liability Company NEWPORT CREAMERY, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
72 - Accommodation and Food	RESTAURANT BUSINESS AND SALE OF ICE CREAM PRODUCTS					
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
35 SOCKANOSSET CROSS ROAD			CRANSTON	RI	02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name WILLIAM N. JANIKIES			Contact Title PRESIDENT			
Street Address 35 SOCKANOSSET CROSS ROAD			City CRANSTON	State RI	<sup>Zip</sup> 02920	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name WILLIAM N. JANIKIES			Manager Name CYNTHIA JANIKIES SIMONSON			
Street Address 35 SOCKANOSSET CROSS ROAD			Street Address 35 SOCKANOSSET CROSS ROAD			
City CRANSTON	State RI	<sup>Zip</sup> 02920	City CRANSTON	State RI	<sup>Zip</sup> 02920	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Island. This information is currently of record with 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 Date						
Cynthia J Simonson 9/7/16						
Signature of Authorized Person SIGN DOCUME A LEGIT						
My	<u>~                                    </u>	Sign Did				
3				***************************************	<del></del>	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov



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