



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

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.

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1. Entity ID Number 149003		2. Exact name of the Limited Liability Company The Rockport Company, LLC			
3. State of Formation DE		4. Brief description of the character of business conducted in Rhode Island Retail Sales			
5. Principal Office Address 1895 JW Foster Blvd		City Canton		State MA	Zip 02021
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Karla Jarvis			Contact Title General Counsel		
Street Address 1895 JW Foster Blvd		City Canton		State MA	Zip 02021
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Robert Infantino			Manager Name Georgina Wraight		
Street Address 1895 JW Foster Blvd			Street Address 1895 JW Foster Blvd		
City Canton	State MA	Zip 02021	City Canton	State MA	Zip 02021
Manager Name Michael Smith			Manager Name Karla Jarvis		
Street Address 1895 JW Foster Blvd			Street Address 1895 JW Foster Blvd		
City Canton	State MA	Zip 02021	City Canton	State MA	Zip 02021
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.					
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 Dan Tarushka, Tax Contractor				Date 06/08/2016	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

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SEP 27 2016

By 284451

MAIL TO:
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