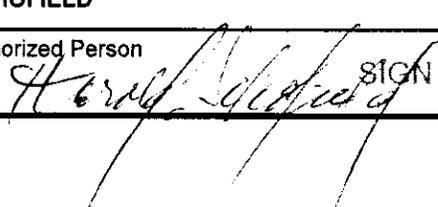




State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**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 <b>139522</b>	2. Exact name of the Limited Liability Company <b>SCHOFIELD IMAGING ASSOCIATES, L.L.C.</b>		
3. NAICS Code 51 - Information	4. Brief description of the character of business conducted in Rhode Island <b>REAL PROPERTY OWNERSHIP AND MANAGEMENT</b>		
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>9 ATLANTIC AVENUE</b>		City <b>NARRAGANSETT</b>	State <b>RI</b>
		Zip <b>02882</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>HAROLD D. SCHOFIELD</b>		Contact Title <b>Manager</b>	
Street Address <b>9 ATLANTIC AVENUE</b>		City <b>NARRAGANSETT</b>	State <b>RI</b>
		Zip <b>02882</b>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <b>HAROLD D. SCHOFIELD</b>		Manager Name	
Street Address <b>9 ATLANTIC AVENUE</b>		Street Address	
City <b>NARRAGANSETT</b>	State <b>RI</b>	Zip <b>02882</b>	
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"/>			
9. Resident Agent in Rhode Island. This information is currently of record with 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 <b>HAROLD D. SCHOFIELD</b>			Date <b>September 28, 2016</b>
Signature of Authorized Person 		SIGN DOCUMENT HERE	

**MAIL TO:**  
**Division of Business Services**  
 148 W. River Street, Providence, Rhode Island 02904-2615  
**Phone:** (401) 222-3040  
**Website:** www.sos.ri.gov

**FILED**  
 OCT 03 2016  
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