

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

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.

Α	NN	JAL	REP	ORT	YEAR:	2016

- 1. **ID No.** 000146013
- 2. Exact Name of the Limited Liability Company KEANE FINANCIAL, LLC
- 3. State of Formation

State: DE

ARTICLE III

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

NAICS Code

6

81

Fee: \$50.00

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

BROKER DEALER SERVICES

5. Principal Office Address

No. and Street: 450 7TH AVE.

SUITE 905

City or Town: NEW YORK State: NY Zip: 10123 Country: USA

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

Contact Name: Contact Title:

No. and Street: 450 7TH AVENUE, SUITE 905

City or Town: NEW YORK State: NY Zip: 10123 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	MICHAEL J. O'DONNELL	450 7TH AVE., SUITE 905 NEW YORK, NY 10123 USA

MANAGER	JARRETT G. ROTH	450 7TH AVE., SUITE 905
		NEW YORK, NY 10123 USA

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

 $\frac{\text{CT CORPORATION SYSTEM}}{\text{PROVIDENCE}\;,\;\; \text{RI}\;\; 02914} \;\; \underline{\text{450 VETERANS MEMORIAL BOULEVARD, SUITE 7A}} \quad \underline{\text{EAST}}$

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

Signed this 25 Day of October, 2016 at 11:12:33 AM 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 **TEAH GRIFFIN**

Signature of Authorized Person

Form No. 632 Revised 09/07

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