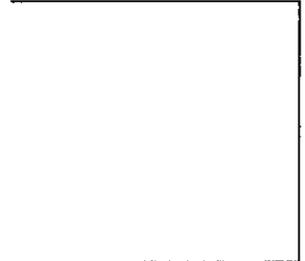




State of Rhode Island and Providence Plantations
Department of State - Business Services Division



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 747954		2. Exact name of the Limited Liability Company Eastern Region Associates, LLC					
3. NAICS Code 55 - Management of Companies		4. Brief description of the character of business conducted in Rhode Island Consulting					
5. State of Formation Rhode Island							
6. Principal Office Address 6 Chases Lane				City Central Falls		State RI	Zip 02863
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Keith S. Venditelli				Contact Title Authorized Representative			
Street Address 6 Chases Lane				City Central Falls		State RI	Zip 02863
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name			Manager Name				
Street Address			Street Address				
City		State	Zip	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.							
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 Keith S. Venditelli					Date 10/20/16		
Signature of Authorized Person <i>Keith S. Venditelli</i>					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 *DL*

OCT 24 2016

BY 3552