



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

2016

Annual Report for the year: \_\_\_\_\_  
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 906381		2. Exact name of the Limited Liability Company Barnoldswick, LLC			
3. NAICS Code 53		4. Brief description of the character of business conducted in Rhode Island  own, operate, manage property			
5. State of Formation RI					
6. Principal Office Address 144 Fischer Circle		City Portsmouth		State RI	Zip 02871
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name PATRICIA S. PLUMB			Contact Title Tax Matters Partner		
Street Address 144 Fischer Circle		City Portsmouth		State RI	Zip 02871
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 PATRICIA S. PLUMB				Date 10/18/17	
Signature of Authorized Person <i>Patricia S. Plumb</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

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OCT 24 2016

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