



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 131657		2. Exact name of the Limited Liability Company Wakefield Pediatrics, LLC			
3. NAICS Code 62 - Health Care and Social Ass		4. Brief description of the character of business conducted in Rhode Island Pediatric Medical Practice			
5. State of Formation RI					
6. Principal Office Address 46 Holley Street, Suite 2		City Wakefield	State RI	Zip 02879	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Lauren Noel, MD			Contact Title Member		
Street Address 46 Holley Street, Suite 2		City Wakefield	State RI	Zip 02879	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name n/a		Manager Name n/a			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name n/a		Manager Name n/a			
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 LAUREN NOEL				Date October 20, 2016	
Signature of Authorized Person <i>x Lauren Noel MD</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 *RL*

OCT 27 2016

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