State of Rhode Island and Providence Plantations Department of State - Business Services Division
2017

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	2. Exact nam	ne of the Limited L	iability Company	······································			
794069	Exact name of the Limited Liability Company Park Wine & Spirits, LLC						
3. NAICS Code 44-45 - Retail Trade 5. State of Formation Rhode Island	Brief description of the character of business conducted in Rhode Island Sale of Alcoholic Beverages						
6. Principal Office Address			City	State	Zip		
1294 Park Avenue			Cranston	RI	02910		
7. Mailing Address of Limited L	iability Compan	v and Name or Tit	le of Contact Person				
Contact Name David D. Barrice		<u>,</u>	Contact Title President				
Street Address 20 Water Valley	Road	· · · · · · · · · · · · · · · · · · ·	City Hope	State RI	^{Zip} 02831		
8. List ALL managers (names	and addresses)	of the Limited Lia	bility Company, IF APPL	ICABLE - DO NOT LIST M	EMBERS		
Manager Name David D. Barricelli Jr.			Manager Name				
Street Address 20 Sparrow Lar	ne	· · · · · · · · · · · · · · · · · · ·	Street Address				
City Cranston	State RI	^{Zip} 02921	City	State	Zip		
Manager Name			Manager Name				
Street Address		-	Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an							
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 d statements, and that all stat	eclare and affii	m that I have exa	mined this report, incl	luding any accompanying	g schedules and		
Name of Authorized Person	Date	Date					
David D. Barricelli	10-26-16	š					
Signature of Authorized Person RENI 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

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FORM 632 - Revised: 08/2016