



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

Fee: \$50.00

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.

ANNUAL REPORT YEAR: 2016

1. ID No. 001659154

2. Exact Name of the Limited Liability Company O.R. COLAN ASSOCIATES, LLC

3. State of Formation

State: FL

ARTICLE III

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

NAICS Code

6

53

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

RIGHT OF WAY CONSULTING

5. Principal Office Address

No. and Street: 7005 SHANNON WILLOW ROAD SUITE 100

City or Town: CHARLOTTE

State: NC Zip: 28226 Country: USA

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

Contact Name: RUBIN MOISE Contact Title: STAFF ACCOUNTANT

No. and Street: 7005 SHANNON WILLOW ROAD SUITE 100

City or Town: CHARLOTTE

State: NC Zip: 28226 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	MARK J. PETERS	11022 S 51ST STREET, SUITE 100 PHEONIX, AZ 85044 USA
MANAGER	CATHERINE COLAN MUTH	7005 SHANNON WILLOW ROAD

		CHARLOTTE, NC 28226 USA
MANAGER	MICHAEL SMITH	8790 GOVERNOR'S HILL DRIVE CINCINNATI, OH 45249 USA
MANAGER	WILLIAM SCOTT CADDEY	9001 AMBERGLEN BOULEVARD, NO. 8105 AUSTIN, TX 78729 USA

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 18 Day of November, 2016 at 10:52:08 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 RUBIN MOISE
Signature of Authorized Person

Form No. 632
Revised 09/07

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