



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 119268		2. Exact name of the Limited Liability Company HOME CARE MANAGEMENT CONSULTANTS, LLC					
3. NAICS Code 55 - Management of Companies and Enterprises		4. Brief description of the character of business conducted in Rhode Island HOME CARE MANAGEMENT SERVICES AND CONSULTING					
5. State of Formation RHODE ISLAND							
6. Principal Office Address 227 PHENIX AVE				City CRANSTON		State RI	Zip 02920
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name NICHOLAS PASSARELLI, JR				Contact Title MEMBER			
Street Address 227 PHENIX AVE				City CRANSTON		State RI	Zip 02920
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 NICHOLAS PASSARELLI						Date 10-27-16	
Signature of Authorized Person 						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

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By 2084