




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 870029		2. Exact name of the Limited Liability Company Coventry Animal Hospital, LLC			
3. NAICS Code 54 - Professional, Scientific, and Technical Services		4. Brief description of the character of business conducted in Rhode Island To provide veterinary services			
5. State of Formation Rhode Island					
6. Principal Office Address 2091 Nooseneck Hill Road		City Coventry		State RI	Zip 02816
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Sam Lester			Contact Title Member		
Street Address 2091 Nooseneck Hill Road		City Coventry		State RI	Zip 02816
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 Sam Lester				Date 10/6/16	
Signature of Authorized Person 					

FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

DE: **10/2/2016**
By **1424**
FORM 632 - Revised: 08/2016