



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

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2016 DEC -1 PM 4:19

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 117024		2. Exact name of the Limited Liability Company BCA Enterprises, LLC			
3. NAICS Code 31-33?		4. Brief description of the character of business conducted in Rhode Island MANUFACTURER OF BOAT CUSHIONS + HELM SEATS			
5. State of Formation RI					
6. Principal Office Address 6 COMMERCIAL WAY		City WARREN		State RI	Zip 02885
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name STEVEN E. STARRETT			Contact Title MEMBER		
Street Address 7 FREMONT STREET			City SOUTH DARTMOUTH	State MA	Zip 02748
<input checked="" type="checkbox"/> 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 STEVEN E. STARRETT				Date 12/1/2016	
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

DEC 01 2016

By 290336 KM