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

Annual Report for the year: _2015_
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 893106	2. Exact name of the Limited Liability Company _Phusion Rx #102_			
3. NAICS Code 62	4. Brief description of the character of business conducted in Rhode Island _Pharmacy_			
5. State of Formation _Rhode Island_				
6. Principal Office Address _42 Ladd Street_	City _East Greenwich_	State _RI_	Zip _02818_	

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

Contact Name _Gregg Pennington_	Contact Title _Director_		
Street Address _42 Ladd Street_	City _East Greenwich_	State _RI_	Zip _02818_

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 ☐

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 _Gregg Pennington_	Date _12/20/16_
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

DEC 20 2016

By _291311_   2.00

FORM 632 - Revised: 08/2016