

# 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.** 000790678
- 2. Exact Name of the Limited Liability Company Greenwich Health and Wellness LLC
- 3. State of Formation

State: RI

#### **ARTICLE III**

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

NAICS Code

6

62

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

## PROVIDING HEALTH AND WELLNESS SERVICES.

5. Principal Office Address

No. and Street: 2740 SOUTH COUNTY TRAIL, UNIT 2

City or Town: <u>EAST GREENWICH</u> State: <u>RI</u> Zip: <u>02818</u> Country: <u>USA</u>

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

Contact Name: LISA MILDER Contact Title:

No. and Street: 2740 SOUTH COUNTY TRAIL, UNIT 2

City or Town: EAST GREENWICH State: RI Zip: 02818 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

| Title | Individual Name             | Address   |
|-------|-----------------------------|---|
|       | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |

#### 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

### Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

ANDREW BERG, ESQ.. 128 DORRANCE STREET, SUITE 400 PROVIDENCE, RI 02903

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

Signed this 24 Day of January, 2017 at 11:13:07 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 LISA MILDER

Signature of Authorized Person

Form No. 632 Revised 09/07

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