



**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: 2017

1. ID No. 000889775

2. Exact Name of the Limited Liability Company GEOSTABILIZATION INTERNATIONAL, LLC

3. State of Formation

State: CO

ARTICLE III

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

NAICS Code 237990

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

GEOHAZARD MITIGATION. DESIGN BUILD

5. Principal Office Address

No. and Street: 543 31 RD
City or Town: GRAND JUNCTION State: CO Zip: 81504 Country: USA

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

Contact Name: Contact Title:
No. and Street: P.O. BOX 4709
City or Town: GRAND JUNCTION State: CO Zip: 81502 Country: USA

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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	COLBY BARRETT	PO BOX 4709 GRAND JUNCTION, CO 81502 USA
MANAGER	TIMOTHY RUCKMAN	PO BOX 4709 GRAND JUNCTION, CO 81502 USA

MANAGER	LLOYD KUEHN	PO BOX 4709 GRAND JUNCTION, CO 81502 USA
MANAGER	MICHELLE URLACHER	PO BOX 4709 GRAND JUNCTION, CO 81502 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

REGISTERED AGENT SOLUTIONS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 27 Day of April, 2017 at 2:06:53 PM 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 MICHELLE URLACHER
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations
All Rights Reserved