



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

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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 001007687		2. Exact name of the Limited Liability Company Tamburini Golf Performance Training LLC			
3. NAICS Code 54 - Professional, Scientific		4. Brief description of the character of business conducted in Rhode Island To conduct personal training, golf performance training and any other purposes permitted by law.			
5. State of Formation Rhode Island					
6. Principal Office Address 1312 Atwood Avenue		City Johnston		State RI	Zip 02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Lisa M. Tamburini			Contact Title Member		
Street Address 100 Federal Way			City Johnston		State RI Zip 02919
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 Lisa Tamburini				Date 6/6/2017	
Signature of Authorized Person <i>Lisa M. Tamburini</i>					

MAIL TO:

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

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