



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

STAMP

FOR
SECRETARY OF STATE
USE ONLY

Annual Report for the year: **2017**

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 121527		2. Exact name of the Limited Liability Company PERKINS FARM LLC	
3. NAICS Code 53110		4. Brief description of the character of business conducted in Rhode Island Purchase, sale and management of real and/or personal property.	
5. State of Formation Rhode Island			
6. Principal Office Address 127 South Pier Road		City Narragansett	State RI Zip 02882
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name William J. Marinelli		Contact Title	
Street Address 50 Stow Road		City Harvard	State MA Zip 01451
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
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
City	State	Zip	City
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 William J. Marinelli		Date 9/14/2017	
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

SEP 18 2017

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FORM 632 - Revised: 08/2017