s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 4-2615	
NOPE X Y			
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. <u>000109674</u>			
2. Exact Name of the Limited Liability Company <u>BRUCE PFUND/SPECIAL PROJECTS, L.L.C.</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>541618</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
CONSULTING			
5. Principal Office Address			
No. and Street: <u>1431 C</u>	OONEYMUS SWAMP ROAD		
	<u>DX 1298</u> <u>K ISLAND</u>	State: <u>RI</u> Zip: <u>02807</u> Cou	untry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: BRUCE PFUND Contact Title: MANAGER			
No. and Street: 1431 COONEYMUS SWAMP ROAD P.O. BOX 1298			
	ISLAND	State: <u>RI</u> Zip: <u>02807</u> Cou	intry: <u>USA</u>
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 Co	de, Country

BRUCE PFUND

1431 COONEYMUS SWAMP ROAD

MANAGER

BLOCK ISLAND, RI 02807 USA

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

CHARLES SOLOVEITZIK TWO ELM STREET P.O. BOX 414 WESTERLY , RI 02891

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

Signed this 20 Day of September, 2017 at 3:17:04 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 <u>CHARLES SOLOVEITZIK</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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