



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

**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 <b>148426</b>	2. Exact name of the Limited Liability Company <b>BRISTOL FENESTRATION, LLC</b>		
3. NAICS Code 23 - Construction	4. Brief description of the character of business conducted in Rhode Island <b>CUSTOM WINDOW AND DOOR INSTALLATION</b>		
5. State of Formation <b>RHODE ISLAND</b>			
6. Principal Office Address <b>27 DIXON AVENUE</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>DAVID HALLIGAN</b>		Contact Title <b>MEMBER</b>	
Street Address <b>27 DIXON AVENUE</b>		City <b>BRISTOL</b>	State <b>RI</b> Zip <b>02809</b>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <b>N/A</b>		Manager Name <b>N/A</b>	
Street Address		Street Address	
City	State	Zip	City State Zip
Manager Name <b>N/A</b>		Manager Name <b>N/A</b>	
Street Address		Street Address	
City	State	Zip	City State Zip
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.			
<b>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.</b>			
Name of Authorized Person <b>DAVID HALLIGAN, MEMBER</b>			Date
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 27 2017  
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