



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 799547		2. Exact name of the Limited Liability Company Body Relaxed Therapeutic Massage LLC			
3. NAICS Code 621399		4. Brief description of the character of business conducted in Rhode Island massage therapy			
5. State of Formation RI					
6. Principal Office Address 418 Arnold Rd		City Coventry		State RI	Zip 02816
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person SOLE PROPRIETOR					
Contact Name PATRICK M DONOVAN		Contact Title Licensed Certified Massage Therapist			
Street Address 112 SHIPPEE AVE		City Coventry		State RI	Zip 02816
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 <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 PATRICK M DONOVAN				Date 9/23/17	
Signature of Authorized Person Patrick M Donovan					

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
BY 60905