



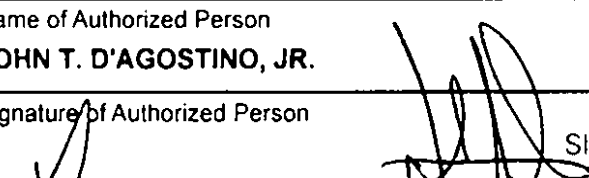
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP


Annual Report for the year: 2017
Limited Liability Company

FOR
FILED IN STATE
FILE ONLY

- 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 1052334		2. Exact name of the Limited Liability Company JTHOMAS CONSTRUCTION, LLC			
3. NAICS Code 212321		4. Brief description of the character of business conducted in Rhode Island PROPERTY MANAGEMENT, CONSTRUCTION, PROJECT MANAGEMENT AND ALL OTHER LAWFUL PURPOSES.			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 697 MOONSTONE BEACH ROAD		City WAKEFIELD		State RI	Zip 02879
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JOHN T. D'AGOSTINO, JR.			Contact Title MEMBER		
Street Address 697 MOONSTONE BEACH ROAD		City WAKEFIELD		State RI	Zip 02879
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 JOHN T. D'AGOSTINO, JR.				Date 10/6/17	
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

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OCT 13 2017
BY 4070