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	
Limited Liebility Com	, <i>,</i>		
Limited Liability Com Annual Report Filing Period: September 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>000097752</u>			
2. Exact Name of the Limited Liability Company $\underline{WOODWARD \& BOSWORTH, LLC}$			
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 here. More information on NAICS can be found online.			
<u>531120</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
COMMERCIAL REAL ESTATE			
5. Principal Office Addre	SS		
No. and Street:930 WATERMAN AVENUECity or Town:EAST PROVIDENCEState:RIZip:02914Country:USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street:930 WATERMAN AVENUECity or Town:EAST PROVIDENCEState: RIZip: 02914Country: USA			
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 Coc	le, Country
MANAGER	KENNETH BOSWORTH	930 WATERMAN AVENUE EAST PROVIDENCE, RI 02914 USA	

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

BARBARA HARRIS 248 BOWEN STREET PROVIDENCE, RI 02906

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

Signed this 16 Day of October, 2017 at 2:36:21 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 BARBARA HARRIS

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved