



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 <u>001664657</u>		2. Exact name of the Limited Liability Company <u>Elite Performance Systems LLC</u>			
3. NAICS Code <u>713940</u>		4. Brief description of the character of business conducted in Rhode Island <u>Sports Performance Training Facility</u>			
5. State of Formation <u>Rhode Island</u>					
6. Principal Office Address <u>83A Tom Harvey R.D. B1A</u>			City <u>Westerly</u>	State <u>R.I.</u>	Zip <u>02891</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Edman Ostermeyer</u>			Contact Title <u>Owner</u>		
Street Address <u>83A Tom Harvey R.D. B1A</u>			City <u>Westerly</u>	State <u>R.I.</u>	Zip <u>02891</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <u>Edman Ostermeyer</u>			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 <u>Edman Ostermeyer</u>				Date <u>10/09/17</u>	
Signature of Authorized Person <u>[Signature]</u>				<div style="text-align: center;"> FILED OCT 18 2017 BY <u>334</u> <u>[Signature]</u> </div>	

MAIL TO:

Division of Business Services