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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
- ightarrow Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company					
157793	DP Construction LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
-23 6115	own operate a construction company					
5. State of Formation	1					
Rhode Island						
6. Principal Office Address			City	State	Zip	
621 POUND HILL ROAD			North Smithfield	RI	02896	
7. Mailing Address of Limited Lia		any and Name or	Title of Contact Person			
Contact Name Peter J. Sangermano, III			Contact Title			
Street Address 621 Pound Hill Road			City North Smithfield	State RI	^{Zip} 02896	
8. List ALL managers (names ar	d addresse:	s) of the Limited L	iability 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					
Resident Agent in Rhode Islan	d. This Inform	nation is currently of	record with the Department of State.	Changes require filir	1g Farm 642,	
Under penalty of perjury, I deci statements, and that all statem	are and affi ents contai	irm that I have ex ined herein are to	camined this report, including a rue and correct.	ny accompanyin	g schedules and	
Name of Authorized Person Date						
Peter J. Sangermano, III				10.17.17		
Signature of Authorized Person		SIGN D	OCUMENTHERE			
			<i>"</i>		 	

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 OL OCT 1 9 2017

FORM 632 - Revised: 08/2016