



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

STAMP

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 1666575		2. Exact name of the Limited Liability Company Bella Vita Adult Daycare, LLC			
3. NAICS Code 624120		4. Brief description of the character of business conducted in Rhode Island Adult Daycare			
5. State of Formation RI					
6. Principal Office Address 66 Merritt Road			City East Providence	State RI	Zip 02915
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Angelo W. Mone			Contact Title Member		
Street Address 66 Merritt Road			City East Providence	State RI	Zip 02915
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name None			Manager Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name None			Manager Name None		
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.					
<i>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.</i>					
Name of Authorized Person Angelo W. Mone, Member				Date 10/21/17	
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

FILED

OCT 30 2017

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