



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

**FILED**

**NOV 17 2017**

**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.

**BY** 371 KM

1. Entity ID Number <b>128070</b>		2. Exact name of the Limited Liability Company <b>T &amp; W Enterprises, LLC</b>			
3. NAICS Code 53 - Real Estate and Rental and		4. Brief description of the character of business conducted in Rhode Island <b>Real Estate Ownership</b>			
5. State of Formation <b>RI</b>		<b>531110</b>			
6. Principal Office Address <b>770 Eddie Dowling DeCelles</b>			City <b>North Smithfield</b>	State <b>RI</b>	Zip <b>02896</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Wayne DeCelles</b>			Contact Title <b>Member</b>		
Street Address <b>770 Eddie Dowling Highway</b>			City <b>North Smithfield</b>	State <b>RI</b>	Zip <b>02896</b>
8. List <b>ALL</b> managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - <b>DO NOT LIST MEMBERS</b>					
Manager Name <b>Wayne DeCelles</b>			Manager Name <b>Thomas DeCelles</b>		
Street Address <b>770 Eddie Dowling Highway</b>			Street Address <b>770 Eddie Dowling Highway</b>		
City <b>North Smithfield</b>	State <b>RI</b>	Zip <b>02896</b>	City <b>North Smithfield</b>	State <b>RI</b>	Zip <b>02896</b>
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.					
<b>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.</b>					
Name of Authorized Person <b>Wayne DeCelles</b>				Date <b>11-14-17</b>	
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](http://www.sos.ri.gov)