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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
→ 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		
001659523	Greenwich Bay Medical Associates, LLC		
3. NAICS Code 62 2110	4. Brief description of the character of business conducted in Rhode Island provide urgent medical care services		
5. State of Formation RI			
6. Principal Office Address 4300 Post Road	City Warwick	State RI	Zip 02818
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Robert Crausman	Contact Title Member		
Street Address 4300 Post Road	City Warwick	State RI	Zip 02818
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name JONATHAN H. MARTIN MD	Manager Name		
Street Address 4300 POST ROAD	Street Address		
City WARWICK / State RI / Zip 02818	City / State / Zip		
Manager Name	Manager Name		
Street Address	Street Address		
City / State / Zip	City / State / Zip		
	Check the box to indicate an attachment ☐		
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 Robert Crausman	Date November 28, 2017		
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
DEC 05 2017
BY CR 319095

FORM 632 - Revised: 10/2017

CR 7392