



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>000505009</u>		2. Exact name of the Limited Liability Company <u>RHODE ISLAND COMMUNITY SPAY-NEUTER CLINIC</u>			
3. NAICS Code <u>813312</u>		4. Brief description of the character of business conducted in Rhode Island <u>VETERINARY CLINIC PROVIDING HIGH QUALITY, SUBSIDIZED SPAY AND NEUTER SERVICES</u>			
5. State of Formation <u>RHODE ISLAND</u>					
6. Principal Office Address <u>235 ELM STREET</u>		City <u>WARWICK</u>		State <u>RI</u>	Zip <u>02888</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>LAURA CARLSON</u>			Contact Title <u>BOARD PRESIDENT</u>		
Street Address <u>P.O. Box 6785</u>			City <u>WARWICK</u>		State <u>RI</u> Zip <u>02887</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City			City		State Zip
Manager Name			Manager Name		
Street Address			Street Address		
City		State	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 <u>GILBERT A. FLETCHER</u>				Date <u>06-04-2018</u>	
Signature of Authorized Person <u>Gilbert A. Fletcher</u>				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

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