



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Limited Liability Company  
Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2018

1. ID No. 000089540

2. Exact Name of the Limited Liability Company COMBINED SERVICES LIMITED LIABILITY COMPANY

3. State of Formation

State: NH

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

524210

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

INSURANCE AGENCY

5. Principal Office Address

No. and Street: TWO DELTA DRIVE, SUITE 301

City or Town: CONCORD

State: NH Zip: 03301 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: ERICA BODWELL, ESQ. Contact Title: VICE PRESIDENT & GENERAL COUNSEL

No. and Street: TWO DELTA DRIVE, SUITE 301

City or Town: CONCORD

State: NH Zip: 03301 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS

| Title   | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|---------|------------------------------------------------|------------------------------------------------------------|
| MANAGER | RICHARD PARK                                   | 1259 BUTTERNUT ROAD<br>WILLISTON, VT 05495 USA             |

|         |                     |                                                            |
|---------|---------------------|------------------------------------------------------------|
| MANAGER | THOMAS RAFFIO       | ONE DELTA DRIVE, PO BOX 2002<br>CONCORD, NH 03302-2002 USA |
| MANAGER | SUSAN WOODS         | 45 OAK STREET<br>MANCHESTER, NH 03104 USA                  |
| MANAGER | PAUL AVERILL        | 134 RABBITS RUN<br>WILLISTON, VT 05495 USA                 |
| MANAGER | FRANCIS BOUCHER     | ONE DELTA DRIVE, PO BOX 2002<br>CONCORD, NH 03302-2002 USA |
| MANAGER | BEVERLY ALTENBURG   | 13 STONEBRIDGE ROAD<br>CAPE ELIZABETH, ME 04107 USA        |
| MANAGER | LISA BRAITERMAN     | 80 ACADEMY DRIVE<br>WOLFEBORO, NH 03894 USA                |
| MANAGER | PATRICIA BERNIER    | 1 DELTA DRIVE<br>CONCORD, NH 03302 USA                     |
| MANAGER | KATHERINE O'CONNELL | 786 LEWIS CREEK ROAD<br>CHARLOTTE, VT 05445 USA            |
| MANAGER | MICHAEL L'ECUYER    | 425 HOOKSETT ROAD<br>MANCHESTER, NH 03104 USA              |
| MANAGER | JASON LENARDSON     | 33 TENNEY STREET<br>YARMOUTH, ME 04096 USA                 |
| MANAGER | DON E OAKES         | 25 CUSTOM HOUSE WHARF<br>PORTLAND, ME 04101 USA            |
| MANAGER | NANCY ROWDEN-BROCK  | 145 VALLEY VIEW ROAD<br>WATERBURY CTR, VT 05677 USA        |
| MANAGER | SUSAN WOODS         | 155 FLEET STREET<br>PORTSMOUTH, NH 03801 USA               |

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI  
02888

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 21 Day of September, 2018 at 11:18:53 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.**

By ERICA BODWELL  
Signature of Authorized Person

Form No. 632  
Revised 09/07