



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

STAMP

**Annual Report for the year: 2018**  
**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 <b>144527</b>		2. Exact name of the Limited Liability Company <b>BLACKSTONE VALLEY LAWN CARE LLC</b>			
3. NAICS Code <b>561730</b>		4. Brief description of the character of business conducted in Rhode Island <b>LAWN CARE SERVICES</b>			
5. State of Formation <b>RHODE ISLAND</b>					
6. Principal Office Address <b>PO BOX 2041</b>			City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02861</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>JOHN BANNON</b>			Contact Title <b>OWNER</b>		
Street Address <b>PO BOX 2041</b>			City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02861</b>
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>JOHN BANNON</b>			Manager Name		
Street Address <b>PO BOX 2041</b>			Street Address		
City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02861</b>	City	State	Zip
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>JOHN BANNON</b>				Date <b>10/27/18</b>	
Signature of Authorized Person 				OR DOCUMENT HERE	

## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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Website: www.sos.ri.gov

**FILED**  
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