**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>727456</b>	2. Exact name of the Limited Liability Company AFFINITY ORNAMENTAL LLC				
3 NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
33999 <del>9</del>	Selling ornamental gift items.				
5. State of Formation					
Rhode Island					
6. Principal Office Address			City	State	Zip
272 Sowams Road			Barrington	RI	02806
7. Mailing Address of Limited Lia	•	y and Name or Tit		· · · · · · · · · · · · · · · · · · ·	
Conlact Name Thomas E. Wright, Esq.			Contact Title Registered Agent		
Street Address 572 Main Street			City Warren	State RI	<sup>Zip</sup> 02885
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Richard W. Gauntlett			Manager Name		
Street Address 272 Sowams Road			Street Address		
City Barrington	State RI	<sup>Zip</sup> 02806	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
	1		<u> </u>	Check the box to i	ndicate 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 ded statements, and that all staten				ding any accompanyin	g schedules and
Name of Authorized Person				Date	//
Name of Authorized Person  Richard W. Gauntlett  Date  12/31/18					1/18
Signature of Authorized Person  Lucian 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

JAN 03 2019