



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2015
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 000796350		2. Exact name of the Limited Liability Company OCEAN STATE ENDEAVORS, LLC			
3. NAICS Code 711211		4. Brief description of the character of business conducted in Rhode Island <i>management programs, athletic programs & consulting</i>			
5. State of Formation RI					
6. Principal Office Address 24 PRESCOTT HALL ROAD		City NEWPORT	State RI	Zip 02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name THOMAS O'BRIEN			Contact Title MEMBER		
Street Address 24 PRESCOTT HALL ROAD		City NEWPORT	State RI	Zip 02840	
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	State	Zip	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.					
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 THOMAS O'BRIEN				Date 03/12/19	
Signature of Authorized Person <i>Thomas O'Brien</i>		SIGN DOCUMENT HERE			

RECEIVED STAFF
 SECRETARY OF STATE
 CORPORATION DIV
 2019 MAR 18 PM 12:02

FILED

MAR 18 2019

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

BY *JY5mm*
A.A. 12:02 PM