



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAMP

Annual Report for the year: **2019**

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 001673056		2. Exact name of the Limited Liability Company WrightWay Systems, LLC		
3. NAICS Code 54190		4. Brief description of the character of business conducted in Rhode Island Commercial innovation		
5. State of Formation RI				
6. Principal Office Address 17 Brainard Street		City Boston	State MA	Zip 02136
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name David Wright		Contact Title Manager		
Street Address 17 Brainard Street		City Boston	State MA	Zip 02136
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS				
Manager Name David Wright		Manager Name		
Street Address 17 Brainard Street		Street Address		
City BOSTON	State MA	Zip 02136	City	State
Manager Name		Manager Name		
Street Address		Street Address		
City	State	Zip	City	State
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 Sean M. McAteer			Date 9/4/19	
Signature of Authorized Person				

FILED

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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