s s	State of Rhode Island and Pro Office of the Secreta		NS Fee: \$50.00		
	Division Of Business 148 W. River St				
HOPE	Providence RI 0290 (401) 222-304				
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: 2019					
1. ID No. <u>000690467</u>					
2. Exact Name of the Limited Liability Company <u>NEPTUNE-BENSON, LLC</u>					
3. State of Formation					
State: <u>DE</u>					
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.					
<u>334416</u>					
4. Brief Description of th	4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
MANUFACTURE AND ASSEMBLY OF WATER FILTRATION EQUIPMENT FOR THE AQUATIC INDUSTRY.					
5. Principal Office Address					
No. and Street: <u>6 JEFFERSON DRIVE</u>					
City or Town: <u>CO</u>	VENTRY State:	<u>RI</u> Zip: <u>02816</u>	Country: <u>USA</u>		
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:					
Contact Name: <u>PEGGY HEMINGER</u> Contact Title: <u>ASST. CORPORATE SECRETARY</u>					
No. and Street: <u>210 SIXTH AVENUE</u> SUITE 3300					
City or Town: <u>PITT</u>	<u>SBURGH</u> State: <u>P</u>	<u>A</u> Zip: <u>15222</u>	Country: <u>USA</u>		
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS					
Title	Individual Name	Add	ess		
	First, Middle, Last, Suffix	Address, City or Town, S	tate, Zip Code, Country		

KEN RODI

MANAGER

210 SIXTH AVE

		PITTSBURGH, PA 15222 USA		
MANAGER	RONALD KEATING	210 SIXTH AVENUE PITTSBURGH, PA 15222 USA		
MANAGER	BENEDICT J STAS	210 SIXTH AVENUE PITTSBURGH, PA 15222 USA		
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u> , <u>RI</u> <u>02914</u>				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				
Signed this 24 Day of September, 2019 at 10:50:09 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 <u>PEGGY HEMINGER</u> Signature of Authorized Person				
Form No. 632 Revised 09/07				
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