## 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 99288	2. Exact name of the Limited Liability Company  QPS ASSOCIATES, LLC				
3. NAIC\$ Code	Brief description of the character of business conducted in Rhode Island				
531120	real whate				
5. State of Formation					
RHODE ISLAND			·		
6. Principal Office Address			City	State	Zip
50 WHITECAP DRIVE, SUITE 102			NORTH KINGSTOWN	RI	02852
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name DOUGLAS B. RIGGS			Contact Title		
Street Address 50 WHITECAP DRIVE, SUITE 102			City NORTH KINGSTOWN	State RI	<sup>Zıp</sup> 02852
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name DOUGLAS B. RIGGS			Manager Name		
Street Address 50 WHITECAP DRIVE, SUITE 102			Sirect Address		
<sup>City</sup> NORTH KINGSTOWN	State RI	<sup>Zip</sup> 02852	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
	1		С	heck the box to	indicate 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 dec statements, and that all states				y accompanyir	ng schedules and
Name of Authorized Person				Date	
DOUGLAS B. RIGGS				09/25/2019	
Signature of Authorized Person					
SCI BOARLING ALL					
				<del></del>	<del></del>

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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कुन्न पुराम (32) REVised: 10/2017

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