



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

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.

FILED
STAMP
OCT 03 2019
BY 662
ea

1. Entity ID Number 118233		2. Exact name of the Limited Liability Company THUNDERBIRD LLC			
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island Own, manage and lease real estate			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 240 Camp Fuller Road		City Wakefield		State RI	Zip 02879
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Richard R. Cranston		Contact Title Member			
Street Address 240 Camp Fuller Road		City Wakefield		State RI	Zip 02879
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 Richard R. Cranston				Date 10-1-19	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services
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