FILED

OCT 1 8 2019

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 825662		2. Exact name of the Limited Liability Company Anchor Toffee, LLC				
3. NAICS Code		Brief description of the character of business conducted in Rhode Island				
311221	ľ	Manufacture and slae of chocolate				
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
356 river Avenue			Providence	RI	02908	
7. Mailing Address of Limited	Liability Compa	any and Name o	or Title of Contact Person		I <u> </u>	
Contact Name Peter J. Kelly			Contact Title Member			
Street Address 356 River Avenue			City Providence	State RI	^{Zio} 02908	
8 List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST I	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	
		1		Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode I	Island, This inforr	nation is currently	of record with the Department of Sta	te. Changes require filin	ng Form 642.	
Under penalty of perjury, I statements, and that all sta	declare and aff	irm that I have ined herein are	examined this report, including true and correct.	g any accompanyin	g schedules and	
Name of Authorized Person Date						
Peter J. Kelly				/ひ/	(1)/19	
Signature of Authorized Pers	en	SiG	N DOCUMENT HERE	<i>f</i>	1 /	

MAIL TO:

Division of Business Services

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

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