



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

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CORPORATIONS DIV
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Annual Report for the year: 2017
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 <u>000150201</u>		2. Exact name of the Limited Liability Company <u>LEGACY VALUATION SERVICES, LLC</u>	
3. NAICS Code <u>541618</u>		4. Brief description of the character of business conducted in Rhode Island <u>Professional Services for the Valuation of Closely held businesses</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>5 WAKE Robin RD. Unit 2505</u>		City <u>Lincoln</u>	State <u>RI</u>
		Zip <u>02865</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>RALPH A. GIGLIOTTI</u>		Contact Title <u>Sole Member</u>	
Street Address <u>5 WAKE Robin ROAD Unit 2505</u>		City <u>Lincoln</u>	State <u>RI</u>
		Zip <u>02865</u>	
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	City	State
Zip		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		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 <u>RALPH A. GIGLIOTTI</u>		Date <u>10/28/19</u>	
Signature of Authorized Person <u>[Signature]</u>			

FILED ✓

OCT 28 2019

BY CH H444P
9:30

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov