



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

FILED

JAN 21 2020


BY

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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 1685370		2. Exact name of the Limited Liability Company Ocean State Primary, LLC			
3. NAICS Code 621111		4. Brief description of the character of business conducted in Rhode Island Medical services.			
5. State of Formation Rhode Island					
6. Principal Office Address 2130 Mendon Road			City Cumberland	State RI	Zip 02864
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Frank D'Alessandro, M.D.			Contact Title Member		
Street Address 2130 Mendon Road			City Cumberland	State RI	Zip 02864
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Robert Crausman, M.D.			Manager Name		
Street Address 2130 Mendon Road			Street Address		
City Cumberland	State RI	Zip 02864	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.					
<i>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.</i>					
Name of Authorized Person Frank D'Alessandro, M.D.				Date 1/15/2020	
Signature of Authorized Person 			SIGN DOCUMENT HERE		

MAIL TO:

Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
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 Website: www.sos.ri.gov