



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.

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1. Entity ID Number <b>1679057</b>		2. Exact name of the Limited Liability Company <b>SectorSite LLC</b>			
3. NAICS Code <b>237130</b>		4. Brief description of the character of business conducted in Rhode Island <b>Commercial Construction - Telecom</b>			
5. State of Formation <b>New Jersey</b>					
6. Principal Office Address <b>53 S. Jefferson Road, Suite M</b>			City <b>Whippany</b>	State <b>NJ</b>	Zip <b>07981</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Michelle Casapulla</b>			Contact Title <b>Business Manager</b>		
Street Address <b>PO Box 118</b>			City <b>Convent Station</b>	State <b>NJ</b>	Zip <b>07961</b>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>Michelle Casapulla</b>			Manager Name		
Street Address <b>PO Box 118</b>			Street Address		
City <b>Convent Station</b>	Zip <b>07961</b>		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.					
<b>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.</b>					
Name of Authorized Person <b>Michelle Casapulla</b>				Date <b>12/30/19</b>	
Signature of Authorized Person <i>Michelle Casapulla</i>				<b>12/30/19</b>	

## MAIL TO:

Division of Business Services

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BY

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