



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

**Annual Report for the year: 2014**  
**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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 SECRETARY OF STATE  
 CORPORATIONS DIVISION  
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1. Entity ID Number <b>140516</b>		2. Exact name of the Limited Liability Company <b>Shelco, LLC</b>			
3. NAICS Code <b>531110</b>		4. Brief description of the character of business conducted in Rhode Island <b>Rental and Sale of Real Estate</b>			
5. State of Formation <b>MA</b>					
6. Principal Office Address <b>25 Fox Run Road</b>			City <b>Wrentham</b>	State <b>MA</b>	Zip <b>02093</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Heidi A. Neipris</b>			Contact Title		
Street Address <b>25 Fox Run Road</b>			City <b>Wrentham</b>	State <b>MA</b>	Zip <b>02093</b>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>Heidi Anderson Neipris</b>			Manager Name		
Street Address <b>25 Fox Run Road</b>			Street Address		
City <b>Wrentham</b>	State <b>MA</b>	Zip <b>02093</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.					
<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 <b>Heidi Neipris</b>				Date <b>1/15/20</b>	
Signature of Authorized Person <i>Heidi Neipris</i>				SIGN DOCUMENT HERE	

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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FORM 632 - Revised: 10/2017