



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 001214175		2. Exact name of the Limited Liability Company KidsVax, LLC			
3. NAICS Code 541990		4. Brief description of the character of business conducted in Rhode Island Administrator of vaccine programs			
5. State of Formation NH					
6. Principal Office Address P. O. Box 1885		City Concord	State NH	Zip 03302	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Nicole G. Price		Contact Title CEO Northeast Region			
Street Address 125 North State Street		City Concord	State NH	Zip 03301	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Fred L. Potter		Manager Name			
Street Address 125 North State Street		Street Address			
City Concord	State NH	Zip 03301	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.					
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 Nicole G. Price				Date April 28, 2020	
Signature of Authorized Person 					

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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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