



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

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Annual Report for the year: 2019
 Limited Liability Company

2020 JUL -7 PM 4:22

- 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 001675837		2. Exact name of the Limited Liability Company Paul J. Fulton, D.O., M.P.H., LLC	
3. NAICS Code 621112		4. Brief description of the character of business conducted in Rhode Island For a few months I worked part-time as an independent contractor psychiatrist from 08/17 - 03/18. Since then I have done a limited amount of consulting.	
5. State of Formation Rhode Island			
6. Principal Office Address 19 Manning Drive		Barrington	RI 02806
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Paul J. Fulton		Contact Title Physician (D.O., M.P.H.)	
Street Address 19 Manning Drive		Barrington	RI 02806
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name None		Manager Name None	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
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 Paul J. Fulton, D.O., M.P.H.		Date 7-7-2020	
Signature of Authorized Person Paul J. Fulton, D.O., M.P.H.			

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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