



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020
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.

FILED

SEP 10 2020

BY 3199 **DB**

1. Entity ID Number 001679383		2. Exact name of the Limited Liability Company ANTHONY J. VALLONE LLC			
3. NAICS Code 561611		4. Brief description of the character of business conducted in Rhode Island BACKGROUND INVESTIGATIONS FOR FEDERAL SECURITY CLEARANCES			
5. State of Formation RI					
6. Principal Office Address 589 ATWELLS AVE, SUITE 3H			City PROVIDENCE	State RI	Zip 02909
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name ANTHONY J. VALLONE			Contact Title OWNER		
Street Address 589 ATWELLS AVE, SUITE 3H			City PROVIDENCE	State RI	Zip 02909
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	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. The Resident Agent information currently of record with the RI Department of State is accurate. 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 ANTHONY J. VALLONE				Date 9/8/2020	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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