



State of Rhode Island
Department of State - Business Services Division

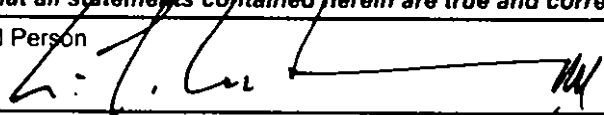
FILED

Annual Report for the year: 2020
Limited Liability Company

SEP 23 2020

BY 1104 DS

- 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 001680493		2. Exact name of the Limited Liability Company THE WILSON ORGANIZATION			
3. NAICS Code 541613		4. Brief description of the character of business conducted in Rhode Island MANAGEMENT CONSULTING INCLUDES: LEADERSHIP TRAINING & DEVELOPMENT; DIVERSITY, INCLUSION & ANTI-RACISM STRATEGY; EXECUTIVE AND LIFE COACHING			
5. State of Formation RI					
6. Principal Office Address 244 WEYBOSSET ST, SUITE 2		City PROVIDENCE	State RI	Zip 02903	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name LAWRENCE E. WILSON			Contact Title MANAGING DIRECTOR/OWNER		
Street Address 14 CADY ST. APT 1		City PROVIDENCE	State RI	Zip 02903	
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.					
<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 				Date 9-18-20	
Signature of Authorized Person LAWRENCE E. WILSON				(SIGNATURE ABOVE L. E. WILSON, III)	

MAIL TO:
Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov