	State of Rhode I Office of the Secreta		Fee: \$50.00	
	Division Of Business	Services		
	148 W. River St			
HOPE	Providence RI 0290 (401) 222-304			
Limited Liebility Com				
Limited Liability Company Annual Report				
Filing Period: September 1	- November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing				
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2020				
<b>1. ID No.</b> <u>000487718</u>				
2. Exact Name of the Limited Liability Company Heitke Cook Associates LLC				
3. State of Formation				
State: <u>RI</u>				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here</u> . More information on <u>NAICS</u> can be found online.				
541110				
4. Brief Description of th	e Character of the Business Which	is Actually Conduc	ted in Rhode Island	
LAW FIRM				
5. Principal Office Addre	ess			
No. and Street: 365 EDDY STREET				
<u>3R</u>	RD FLOOR			
City or Town: <u>PR</u>	OVIDENCE State: R	[ Zip: <u>02903</u>	Country: <u>USA</u>	
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact	Person:	
Contact Name: KEVIN D. HEITKE Contact Title: MANAGING MEMBER				
	<u>365 EDDY STREET</u> PROVIDENCE State: RI		Country: USA	
	Each Manager of the Limited Liab			
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country		
MANAGER	MANAGER DAWN M COOK 325 CHAPLIN		HAPLIN DRIVE	
		COVENTRY, RI 02816 USA		

	16 DAVIS DRIVE PIERMONT, NH 03779 USA			
KEVIN D. HEITKE	299 CARPENTER STREET PROVIDENCE, RI 02909 USA			
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
KEVIN D. HEITKE 365 EDDY STREET PROVIDENCE, RI 02903				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				
<ul> <li>Signed this 1 Day of October, 2020 at 12:07:23 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.</li> <li>By <u>KEVIN D. HEITKE</u> Signature of Authorized Person</li> </ul>				
Form No. 632 Revised 09/07				
© 2007 - 2020 State of Rhode Island All Rights Reserved				
	CHODE ISLAND - DO NOT ALTER g of Form 642 - R.I.G.L. 7-16-11 EDDY STREET PROVIDENCE , RI Recuted by an authorized person p etober, 2020 at 12:07:23 PM by t al or individuals signing this inst signatory, under penalties of pe d or the act and deed of the comp e electronic filing, in compliance			