



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**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

1. ID No. 001693477

2. Exact Name of the Limited Liability Company Towers Administrators LLC

3. State of Formation

State: DE

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

524292

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

INSURANCE THIRD PARTY ADMINISTRATOR, DISCOUNT MEDICAL PLAN

5. Principal Office Address

No. and Street: 4510 COX ROAD, SUITE 111

City or Town: GLEN ALLEN

State: VA

Zip: 23060

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 4510 COX ROAD, SUITE 111

City or Town: GLEN ALLEN

State: VA

Zip: 23060

Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	BENJAMIN C. ADAMS	99 HIGH STREET, SUITE 2800 BOSTON, MA 02110 USA
MANAGER	BENJAMIN R. PRESTON	99 HIGH STREET, SUITE 2800

		BOSTON, MA 02110 USA
MANAGER	RICHARD A. BATES	99 HIGH STREET, SUITE 2800 BOSTON, MA 02110 USA
MANAGER	SARAH MULLINS	99 HIGH STREET, SUITE 2800 BOSTON, MA 02110 USA
MANAGER	GREGG KELLY	99 HIGH STREET, SUITE 2800 BOSTON, MA 02110 USA
MANAGER	JOE KERN	99 HIGH STREET, SUITE 2800 BOSTON, MA 02110 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI
02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 5 Day of October, 2020 at 3:27:52 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.

By JOE KERN
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2020 State of Rhode Island
All Rights Reserved