RI SOS Filing Number: 202066346760 Date: 10/15/2020 4:00:00 PM

	State of Rhode Island	
	State of Rhode Island  Department of State - Business Services Division	) [

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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.

Entity ID Number	2. Exact name of the Limited Liability Company						
001677674	NPAC Subsidiary. LLC						
3. NAICS Code	4. Brief des	scription of the ch	naracter of business conducted	d in Rhode Island			
711310	Performing Arts Center						
5. State of Formation							
RI							
6. Principal Office Address			City	State	Zip		
11 Touro Street			Newport	RI	02840		
7. Mailing Address of Limited Li	iability Compa	iny and Name or					
Contact Name John Cratin			Contact Title Board Chair				
Street Address P.O. Box 234			City Newport	State RI	<sup>Zip</sup> 02840		
8. List ALL managers (names a	and addresses	s) of the Limited I	Liability Company, IF APPLICA	ABLE - DO NOT LIST I	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		
	<u> </u>			Check the box to it	ndicate an attachment		
9. The Resident Agent informat	ion currently c	of record with the	RI Department of State is acc	curate. Changes require	e filing Form 642.		
Under penalty of perjury, I de statements, and that all state.				ing any accompanyin	g schedules and		
Name of Authorized Person	2000	th		Date 10	9-20		
Signature of Authorized Person		In de	on t	<b></b>	-		

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov