



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

STAMP

NOV 09 2020

BY

1. Entity ID Number 127727		2. Exact name of the Limited Liability Company M & C Associates . LLC			
3. NAICS Code 484230		4. Brief description of the character of business conducted in Rhode Island Petroleum and trucking services, and for all other lawful purposes.			
5. State of Formation RI					
6. Principal Office Address HIGH STREET		City Block Island		State RI	Zip 02807
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Clifford R. McGinnes			Contact Title Managing Member		
Street Address PO Box 403		City Block Island		State RI	Zip 02807
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Clifford R. McGinnes			Manager Name		
Street Address PO Box 403			Street Address		
City Block Island	State RI	Zip 02807	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 Elliot Taubman, Esq.				Date 10/30/2020	
Signature of Authorized Person 					

## MAIL TO:

Division of Business Services

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