



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

NOV 10 2020

BY

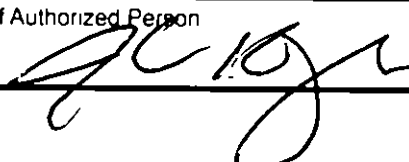
Annual Report for the year: 2020

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.

1. Entity ID Number 158303		2. Exact name of the Limited Liability Company BRISTOL COUNTY PHYSICAL THERAPY AND SPORTS REHABILITATION, LLC			
3. NAICS Code 624310		4. Brief description of the character of business conducted in Rhode Island Provide physical therapy and sports rehabilitation			
5. State of Formation Rhode Island					
6. Principal Office Address 1180 Hope Street			City Bristol	State RI	Zip 02809
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name James C. Kovolyan			Contact Title Member		
Street Address 1180 Hope Street			City Bristol	State RI	Zip 02809
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. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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 James C. Kovolyan				Date 10.14.20	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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