



State of Rhode Island
Department of State - Business Services Division

FILED

JAN 27 2021

BY HSD

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 790865		2. Exact name of the Limited Liability Company Bonna, LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island Real estate and any other lawful purpose.			
5. State of Formation Rhode Island					
6. Principal Office Address 40 Commercial Way			City East Providence	State RI	Zip 02914
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Donna Q. Read			Contact Title Manager		
Street Address 40 Commercial Way			City East Providence	State RI	Zip 02914
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Donna Q. Read			Manager Name		
Street Address 40 Commercial Way			Street Address		
City East Providence	State RI	Zip 02914	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 Donna Q. Read				Date 1-22-21	
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
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