



State of Rhode Island
Department of State - Business Services Division

STAMP

Annual Report for the year: 2020
Limited Liability Company

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2021 SEP 13 A 9:52

- 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 001674716		2. Exact name of the Limited Liability Company HWC BRISTOL LLC	
3. NAICS Code 453990		4. Brief description of the character of business conducted in Rhode Island CELL PHONE STORE	
5. State of Formation RI			
6. Principal Office Address 576 METACOM AVE SUITE 19 & 20		City BRISTOL	State RI
		Zip 02809	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name SIMONE COOKE		Contact Title OFFICE MANAGER	
Street Address 46 SOUTHFIELD AVE SUITE 100		City STAMFORD	State CT
		Zip 06902	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name CHRISTOPHER SEVERO		Manager Name	
Street Address 46 SOUTHFIELD AVE SUITE 100		Street Address	
City STAMFORD	State CT	Zip 06902	City
		State	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
		State	
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 SIMONE COOKE		Date 8/31/2021	
Signature of Authorized Person 			

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MAIL TO:
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