



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company**

**Annual Report**

*Filing Period: September 1 - November 1*

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR: 2021**

**1. ID No. 000089540**

**2. Exact Name of the Limited Liability Company COMBINED SERVICES LIMITED LIABILITY COMPANY**

**3. State of Formation**

State: NH

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

524210

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

INSURANCE AGENCY

**5. Principal Office Address**

No. and Street: TWO DELTA DRIVE, SUITE 301

City or Town: CONCORD

State: NH Zip: 03301 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: Contact Title:

No. and Street: TWO DELTA DRIVE, SUITE 301

City or Town: CONCORD

State: NH Zip: 03301 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	MICHAEL P GOLDBERG DMD	700 MOUNT HOPE AVE, SUITE 410 BANGOR, ME 04401 USA

MANAGER	RICHARD C BOLDUC DMD	16 LAURENCE LANE RYE BEACH, NH 03871 USA
MANAGER	KAREN CAREW CPA	148 BROAD COVE DRIVE CONCORD, NH 03301 USA
MANAGER	JAMES LARRICK	10 CURTISS ROAD HANOVER, NH 03755 USA
MANAGER	BRUCE NICKERSON	28 GILMORE LANE HOLDEN, ME 04429 USA
MANAGER	BRIAN D DUFFY ESQ	1 DELTA DRIVE CONCORD, NH 03302 USA
MANAGER	KATHERINE O'CONNELL	786 LEWIS CREEK ROAD CHARLOTTE, VT 05445 USA
MANAGER	DON E OAKES	25 CUSTOM HOUSE WHARF PORTLAND, ME 04101 USA
MANAGER	NANCY ROWDEN-BROCK	145 VALLEY VIEW ROAD WATERBURY CTR, VT 05677 USA
MANAGER	RICHARD PARK	1259 BUTTERNUT ROAD WILLISTON, VT 05495 USA
MANAGER	THOMAS RAFFIO	ONE DELTA DRIVE, PO BOX 2002 CONCORD, NH 03302-2002 USA
MANAGER	FRANCIS BOUCHER	ONE DELTA DRIVE, PO BOX 2002 CONCORD, NH 03302-2002 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI  
02888

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 14 Day of September, 2021 at 1:44:16 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.**

By BRIAN DUFFY  
Signature of Authorized Person

Form No. 632  
Revised 09/07