



**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. 001697821

2. Exact Name of the Limited Liability Company Baron Ventures LLC

3. State of Formation

State: RI

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.

451120

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

BARON VENTURES LLC DBA BLACKSTONE VALLEY BREWING SUPPLIES SELLS MERCHANDISE FOR THE HOBBY OF HOMEBREWING. MERCHANDISE INCLUDES DRY GOODS - GRAINS, YEAST, HOPS, BOTTLES, CAPS, BREWING EQUIPMENT, DRAFT LINES. NO LIQUOR IS SOLD ON PREMISES. ONLY INGREDIENTS TO DO THE HOBBY OF HOMEBREWING AT HOME.

5. Principal Office Address

No. and Street: 403 PARK AVE.

City or Town: WOONSOCKET

State: RI

Zip: 02895

Country: USA

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

Contact Name: Contact Title:

No. and Street: 403 PARK AVE

City or Town: WOONSOCKET

State: RI

Zip: 02895

Country: USA

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

Title	Individual Name	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	LAURA ELIZABETH BARON	403 PARK AVE. WOONSOCKET, RI 02895 USA
MANAGER	CHARLES BARON	403 PARK AVE. WOONSOCKET, RI 02895 USA

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

LAURA ELIZABETH BARON 94 SAINT MARCEL ST. WOONSOCKET , RI 02895

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

Signed this 29 Day of September, 2021 at 9:56:09 AM 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 LAURA BARON
Signature of Authorized Person

Form No. 632
Revised 09/07

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