FILED

Annual Report for the year: 2021 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.

BY	OCT 0 7 2021
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Entity ID Number		2. Exact name of the Limited Liability Company Hill's Tavern and Grill, LLC				
1686875	Hill's Ta					
3. NAICS Code		Brief description of the character of business conducted in Rhode Island				
722511	Restaurar	nt operations.				
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
417 Putnam Pike			Chepachet	RI	02814	
7. Mailing Address of Limit		any and Name o	r Title of Contact Person			
Contact Name Albert L. Hill, Sr.			Contact Title			
Street Address 25 Ponderosa Lane			City Pascoag	State RI	^{Z_{ip}} 02859	
8. List ALL managers (nar	nes and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Manager Name	1		Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
<u>.</u>	.	<u></u>		Check the box to	indicate an attachment	
9. The Resident Agent info	rmation currently	of record with the	e RI Department of State is acc	urate. Changes requir	e filing Form 642.	
Under penalty of perjury, statements, and that all s	I declare and aff statements conta	firm that I have ined herein are	examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Perso	-			Date		
Albert L. Hill, Sr.				X 1	5/1/21	
Signature of Authorized Pe	erson			/\	/ /	
VIIIIZ	7///					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov