



State of Rhode Island

Department of State - Business Services Division

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.

FILED

OCT 08 2021

BY

1. Entity ID Number 000539464		2. Exact name of the Limited Liability Company WWB, LLC			
3. NAICS Code 624210		4. Brief description of the character of business conducted in Rhode Island Establishment of a business incubator			
5. State of Formation Rhode Island					
6. Principal Office Address 39 High Street			City Bristol	State RI	Zip 02809
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Lisa Raiola			Contact Title		
Street Address 39 High Street			City Bristol	State RI	Zip 02809
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name WATERMAN BROWN			Manager Name DAVID WURTZEL		
Street Address 39 High Street			Street Address 109 CONWAY AVE		
City Bristol	State RI	Zip 02809	City NARBETH	State PA	Zip 19072
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 LISA RAIOLA			Date 10/1/21		
Signature of Authorized Person 					

MAIL TO:**Division of Business Services**

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

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