



**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. 001694892

2. Exact Name of the Limited Liability Company Strata Decision Technology, L.L.C.

3. State of Formation

State: IL

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.

511210

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

THE COMPANY OFFERS AN INTEGRATED SUITE OF FINANCIAL ANALYTICS SOLUTIONS FOR BUDGETING, STRATEGIC FINANCIAL PLANNING, CAPITAL PURCHASE PLANNING AND TRACKING, MANAGEMENT REPORTING, COST ACCOUNTING AND DECISION SUPPORT. THE COMPANY'S PRODUCTS OPERATE USING A SOFTWARE AS A SERVICE, MULTI-TENANT ARCHITECTURE MODEL ALTHOUGH THE COMPANY DOES HAVE CERTAIN LEGACY PRODUCTS AND CONTRACTS THAT ALLOW THE CLIENT TO HOST CERTAIN LEGACY SOFTWARE PRODUCTS INTERNALLY. THE PRINCIPAL CUSTOMERS OF THE COMPANY ARE HOSPITALS AND MULTI-HOSPITAL HEALTHCARE SYSTEMS LOCATED ACROSS THE UNITED STATES.
STRATA DECISION TECHNOLOGY HOLDINGS, LLC IS THE SOLE MEMBER.

5. Principal Office Address

No. and Street: 200 E RANDOLPH STREET

FLOOR 49

City or Town: CHICAGO

State: IL Zip: 60601 Country: USA

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

Contact Name: Contact Title:
No. and Street: 200 E RANDOLPH STREET
FLOOR 49
City or Town: CHICAGO State: IL Zip: 60601 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	ROBERT CRISCI	2900 E. RANDOLPH STREET 49 FLOOR CHICAGO, IL 60601 USA
MANAGER	JASON CONLEY	200 E RANDOLPH STREET FLOOR 49 CHICAGO, IL 60601 USA
MANAGER	JOHN K STIPANCICH	6901 PROFESSIONAL PARKWAY EAST STE 200 SARASOTA, FL 34240 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 28 Day of October, 2021 at 10:40:14 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 JOHN K STIPANCICH
Signature of Authorized Person

Form No. 632
Revised 09/07