



State of Rhode Island
Department of State - Business Services Division

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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.

1. Entity ID Number 001694342		2. Exact name of the Limited Liability Company Central Contacts, LLC			
3. NAICS Code 511210		4. Brief description of the character of business conducted in Rhode Island Software Publisher			
5. State of Formation Rhode Island					
6. Principal Office Address One Richmind Square, Suite 125B		City Providence	State RI	Zip 02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Christine Wells			Contact Title Authorized Representative		
Street Address 784 Clearwater Loop		City Post Falls	State ID	Zip 83854	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Bailey O'Donnell		Manager Name			
Street Address One Richmind Square, Suite 125B		Street Address			
City Providence	State RI	Zip 02906	City	State	Zip
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 Riley Park				Date 11-12-2021	
Signature of Authorized Person <i>Riley Park</i>					

MAIL TO:
 Division of Business Services
 148 W. River Street. Providence. Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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