



State of Rhode Island
Department of State - Business Services Division

FILED

STA
DEC 08 2021

BY

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 001689277		2. Exact name of the Limited Liability Company STAFFORD ELECTRIC, LLC			
3. NAICS Code 541690		4. Brief description of the character of business conducted in Rhode Island ELECTRICIAN			
5. State of Formation RI					
6. Principal Office Address 18 ROBIN VALE DRIVE		City NORTH SCITUATE		State RI	Zip 02857-3011
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name KENNETH P. STAFFORD		Contact Title MEMBER			
Street Address 18 ROBIN VALE DRIVE		City NORTH SCITUATE		State RI	Zip 02857-3011
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name N/A		Manager Name N/A			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name N/A		Manager Name N/A			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☐					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person KENNETH P. STAFFORD				Date 10/01/21	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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