



State of Rhode Island  
Department of State - Business Services Division

REC'D RIDOS BSD  
23 DEC 4 PM 2:32:09

STAMP

FOR  
SECRETARY OF STATE  
USE ONLY

Annual Report for the year: 2023  
Limited Liability Company

- Filing period: February 1 - May 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <u>000869919</u>		2. Exact name of the Limited Liability Company <u>Form &amp; Function Physical Therapy and Sports Medicine LLC</u>	
3. NAICS Code <u>621340</u>		4. Brief description of the character of business conducted in Rhode Island <u>Provides physical therapy services</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>250 Scrabbletown Rd, RI</u>		City <u>North Kingstown</u>	State <u>RI</u>
		Zip <u>02852</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Guerrino Boni</u>		Contact Title <u>President</u>	
Street Address <u>250 Scrabbletown Rd</u>		City <u>North Kingstown</u>	State <u>RI</u>
		Zip <u>02852</u>	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 <u>Guerrino Boni</u>			Date <u>12/1/23</u>
Signature of Authorized Person 			

FILED 232  
DEC 04 2023  
BY SSB

MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)