



**State of Rhode Island
Department of State - Business Services Division**

Annual Report for the year: 2024
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.

FILED
FEB 22 2024
BY S981 DS

1. Entity ID Number 001691986		2. Exact name of the Limited Liability Company Nursing Placement Transportation Services, LLC	
3. NAICS Code 485991		4. Brief description of the character of business conducted in Rhode Island Special Needs Transportation	
5. State of Formation Rhode Island			
6. Principal Office Address 588 Pawtucket Avenue		City Pawtucket	State RI
		Zip 02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Michael Bigney		Contact Title Member	
Street Address 588 Pawtucket Avenue		City Pawtucket	State RI
		Zip 02860	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <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 Michael Bigney		Date 1/6/2024	
Signature of Authorized Person 			

MAIL TO:

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