RI SOS Filing Number: 202458994120 Date: 8/22/2024 10:59:00 AM



## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year:

**Limited Liability Company** 

- -> Filing period: February 1 May 1
- → Filing Fee: \$50.00

1. Entity ID Number

5. State of Formation

6. Principal Office Address

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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May 1			:50:1
ree if form is not filed by May 31.			89
2. Exact name of the Limited Liability Company  On Point Disposal, UC			
Brief description of the character of business conducted in Rhode Island			
Waste Managner / Trash Removed			
	City	State	Zip
harchRd	Tiverton	RI	02878
ility Company and Name or Title of Contact Person			
mes	Contact Title  Owner  City		
rchfol	City Tiverton	State RT	2ip 028 78

tone ChurchRd 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title when Street Address City 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 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 10:59 AM

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