



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2013

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.
 Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>135630</u>		2. Exact name of the limited liability company <u>KAN FINANCIAL, LLC</u>			
3. State of Formation <u>Rhode Island</u>		4. Brief description of the character of business conducted in Rhode Island <u>Financial Investment and Financial Matters</u>			
5. Principal office address <u>465 Potter Road</u>		City <u>North Kingstown</u>	State <u>RI</u>	Zip <u>02852-1647</u>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name <u>Kenneth A. Nulman</u>		Contact Title			
Street Address <u>465 Potter Road</u>		City	State	Zip	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name <u>Kenneth A. Nulman</u>		Manager Name			
Street Address <u>465 Potter Road</u>		Street Address			
City <u>North Kingstown</u>	State <u>RI</u>	Zip <u>02852-1647</u>	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

SECRETARY OF STATE
 CORPORATIONS DIV
 2013 OCT 25 PM 12:36

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 OCT 25 2013
 By 209169
KM
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File Date _____
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 By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Kenneth A. Nulman 10/25/13
 Signature of Authorized Person Date

Kenneth A. Nulman
 Print or Type Name of Authorized Person