



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. 000514223		2. Exact name of the limited liability company Stainless LLC			
3. State of Formation PA		4. Brief description of the character of business conducted in Rhode Island Broadcast Tower Services			
5. Principal office address 100 West Main Street, Suite 400		City Lansdale	State PA	Zip 19446	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Gregg A. Fehrman		Contact Title President / Chief Engineer			
Street Address 100 West Main Street, Suite 400		City Lansdale	State PA	Zip 19446	
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 Donald T. Doty - Owner/Partner		Manager Name J. Patrick Moore - Owner/Partner			
Street Address 1570 W. Beltline Road		Street Address 1570 W. Beltline Road			
City Cedar Hill	State TX	Zip 75104	City Cedar Hill	State TX	Zip 75104
Manager Name Gregg A. Fehrman		Manager Name			
Street Address 100 West Main Street, Suite 400		Street Address			
City Lansdale	State PA	Zip 19446	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.					

FILED

SEP 22 2014

~ 001748

File Date _____
 Check No _____
 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.

[Signature] _____ 7/30/14 Date

 Print or Type Name of Authorized Person

mailed 9/13/14