



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
118 W. River Street
Providence, RI 02901-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2009

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b)(5)) is subject to a penalty fee of \$25.00.

1. ID No. 142919		2. Exact name of the limited liability company Sentinel Realty LLC			
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island The purchasing, selling and rental of real estate			
5. Principal office address 303 Jefferson Blvd.		City Warwick		State RI	Zip 02888
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Timothy J. Robenhymer			Contact Title Member		
Street Address 303 Jefferson Blvd.		City Warwick		State RI	Zip 02888
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name Timothy J. Robenhymer			Manager Name Stephen R. Archambault		
Street Address 303 Jefferson Blvd.			Street Address 303 Jefferson Blvd.		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
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 of Form 642 - R.I.G.L. 7-16-11					

FILED
OCT 02 2009
By 1100286

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

142919

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.

Timothy J. Robenhymer 10/1/09
Signature of Authorized Person Date
Timothy J. Robenhymer Member
Print or Type Name of Authorized Person

File Date _____
Check No. _____
By: _____
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