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

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2010

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&c)) is subject to a penalty fee of $25.00.*

1. ID No.	2. Exact name of the limited liability company			
506824	Spindle City Realty, LLC			
3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island			
RHODE ISLAND	REAL ESTATE			
5. Principal office address		City	State	Zip
79 North Main Street		Fall River	Massachusetts	02720

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title			
William R. Eccles, Jr.	Manager			
Street Address	City	State	Zip	
79 North Main Street	Fall River	Massachusetts	02720	

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	Street Address	City	State	Zip
William R. Eccles, Jr.	95 Carol Street	Somerset	Massachusetts	02726
Michael W. Berube	101 Cypress Avenue	Tiverton	Rhode Island	02878
Paul S. Medeiros	314 Winnisimet Drive	Tiverton	Rhode Island	02878
Robert F. Collins	35 Caleb Street	Fall River	Massachusetts	02720

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

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

506824

FILED
File Date OCT 06 2010
Check No. By 128208
By: DS
FOR SECRETARY OF STATE USE ONLY
53710-4-558632

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 of Authorized Person *Date* 9/21/2010

William R. Eccles, Jr., Manager
Print or Type Name of Authorized Person

Form 632 Rev. 08/08