



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

A. KAPLAN MOUS, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

# LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

**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. 000132800	2. Exact name of the limited liability company Windridge Properties, LLC
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3. State of Formation Rhode Island	4. Description of the business which is actually conducted in Rhode Island dealing in real estate
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5. Principal office address 230 Conanicus Avenue, P.O. Box 521	City Jamestown	State RI	Zip 02835
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## 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name John H. Brittain, Jr.	Contact Title Member		
Street Address 230 Conanicus Avenue, P.O. Box 521	City Jamestown	State RI	Zip 02835

## 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	Manager Name					
Street Address	Street Address					
City	City	State	Zip	City	State	Zip
Manager Name	Manager Name					
Street Address	Street Address					
City	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

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

000132800  
FILED

File Date	SEP 20 2011
Check No.	RV 5505
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 of Authorized Person John H. Brittain, Jr.	Date 9/15/11
Print or Type Name of Authorized Person	