



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 2012

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. 156317		2. Exact name of the limited liability company JMCM REALTY, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island ownership and development of real estate			
5. Principal office address 95 Rice Avenue		City East Providence	State RI	Zip 02914-0000	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Joseph F. Martins Revocable Trust Agreement dated 7/15/98		Contact Title Member			
Street Address 95 Rice Avenue		City East Providence	State RI	Zip 02914-0000	
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 Joseph F. Martins		Manager Name Carmen M. Martins			
Street Address 95 Rice Avenue		Street Address 95 Rice Avenue			
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914
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.					

FILED

AUG 10 2012

1818

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.

Joseph F. Martins 09/04/2012
 Signature of Authorized Person Date
 Joseph F. Martins Revocable Trust Agreement dated 7/15/98
 By: **Joseph M. Martins, Co-Trustee**
 Print or Type Name of Authorized Person
Member