



**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. <b>0108081</b>		2. Exact name of the limited liability company <b>CRIS AN, LLC</b>			
3. State of Formation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>ownership and development of real estate and any other lawful purpose</b>			
5. Principal office address <b>25 Thomas Lane</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921-0000</b>
Contact Name <b>Andrew Gazerro, Jr.</b>			Contact Title <b>Member</b>		
Street Address <b>25 Thomas Lane</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921-0000</b>
7. IF APPLICABLE, ADDITIONAL ADDRESS FOR LIMITED LIABILITY COMPANY IF APPLICABLE					
Manager Name <b>N/A</b>			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

**FILED**

**AUG 29 2013**

*CK # 394  
\$50.00  
8/27/13*



*394*

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.

*Andrew Gazerro Jr* 09/01/2013  
Signature of Authorized Person Date

**Andrew Gazerro, Jr.**  
Print or Type Name of Authorized Person

**Member**