

## 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.	2. Exact name of the limited liability company						
512983	Time Re	alty Manageme	nt LLC				
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island					
Rhode Island	To purch	To purchase, sell, lease and manage real estate and any other lawful business					
5. Principal office address 33 Major Arnold Roaci			City Narragansett	State RI	Zip <b>02882</b>		
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Contact Name Robert A. DiMeo, Trustee			Contact Title  Member				
Street Address 33 Major Arnold Road			City Narragansett	State RI	Zip <b>02882</b>		
AND THE WAY AND THE STATE OF A TRACTION OF							
Manager Name None			Manager Name				
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip SEC		
BREESTEEN RECEIVEN HEE	TEMPO #	<b>电影电影</b>		haari aa <mark>ka ce</mark> aring	United Parameters (1976)		
This information is currently o	f record in the	e Office of the Secr	retary of State. Changes require	filing Form 642.	m of		

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Form No. 632 Revised: 01/2012

Under penalty of perjury, I declare and affirm that I have examin	ed
Under penalty of perjury, I declare and affirm that I have examine this report, including any accompanying schedules and statem and that it is superments contained in the true and correct.	ents
and that an steements contained there are true and correct.	/

Signature of Authorized Person

Date

Robert A. DiMeo, Trystee, Member

Print or Type Name of Authorized Person