

## 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				
277105	East Mai	East Main Place, LLC.				
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Manage	, maintain. acq	uire and develop real estate	9		
5. Principal office address 3030 East Main Road			City Portsmouth	State RI	Zip <b>02871</b>	
G. MAILING AUDINESS OF	LIMITED LIABILIT	TY COMPANY AND	NAME ORTITLE OF CONTACT P	PRISON:		
Contact Name Aphrodite Laureanno			Contact Title member			
Street Address 3030 East Main Road			City Portsmouth	State RI	Zip <b>02871</b>	
7 LST ALL SANGOIRS	LAMES AND ADE	RESCES! OF THE	LIMITED CLABILITY COMPANY, IF	APPLIÇABLE - <u>B</u> O	NOT LIST MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN R						
		e Office of the Seci	retary of State. Changes require f	iling Form 642.		
Tillo III.C.I	,					

## **FILED**

OCT 88 2013

by<u>85969</u>

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,

MINIMUM CONTRACTOR

Aphrodite Laureanno

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012