

## 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.

	Z. Exact nam	2. Exact name of the limited liability company				
473743	SAS	R Realty, L	LC			
3. State of Formation	4. Brief descr	4. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Owner	Ownership, management and rental of real estate.				
5. Principal office address			City	State	Zip	
224 Waterman Avenue			East Provi	dence RI	02914	
ार्गेयात्राहरू कामान्यस्थानम्	MILEUPABILIT	COMPANY AND NAM	IE OR TITLE OF CONTACT	FPERSON:		
Contact Name Stephen A. Remsbecker			Contact Title Managing	Contact Title Managing Member		
Street Address 224 Waterman Avenue			City East Provi	dence RI	Zip 02914	
7. LIST ALL MANAGERS (N XX: BOX FOR ATTACHMI	AMES/AND ADDI	ESSES) OF THE LIMI	TED LIABILITY COMPANY	, IF APPLICABLE - DO	IOT 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	Street Address		
City	State	Zip	City	State	Zip	
RESIDENT AGENT IN RHO	DE ISLAND					
This information is currently	the state of the s	Office of the Secretary	of State, Changes requir	e filing Form 642.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

## **FILED**

OCT 0 9 2013

BY	1044
File Date Check No.	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.  May a property of the statements of the statement
FOR SECRETARY OF STATE USE ONLY	Stephen A. Remsbecker, Managing Member  Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012