

## 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 \_\_\_\_ A013

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							
589181	41 Centu	ıry Properties, Ll	-C						
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island							
Rhode Island	To purca	To purcahse, hold, develop, rent and sell real estate							
5. Principal office address 47 Molter Street			City Cranston	State RI	Zip <b>02910</b>				
6. MAILING ADDRESS (	OF LIMITED LIABILIT	Y COMPANY AND N	AME OR TITLE OF CONTACT	PERSON:					
Contact Name David D. Weisberg			Contact Title Manager						
Street Address 47 Molter Street			City Cranston	State RI	Zip <b>02910</b>				
7. LIST <u>ALL</u> MANAGER ("X" BOX FOR ATTAC		RESSES) OF THE LI	MITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LIST MEMBERS				
Manager Name David D. Weisberg			Manager Name						
Street Address 47 Molter Street			Street Address						
City Cranston	State RI	Zip 02910	City	State	Zip				
Manager Name			Manager Name						
Street Address			Street Address						
City	State	Zip	City	State	Zip				
8. RESIDENT AGENT IN	RHODE ISLAND								
This information is curr	ently of record in the	e Office of the Secret	ary of State. Changes require	e filing Form 642.					

## **FILED**

OCT 0 9 2013

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File Date			this report, including any accompanying sc	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statement	
			and that all statements contained herein are	true and correct.	
Check No _				1014/13	
By:	1		Signature of Authorized Person	Date	
FOR SECRE	TARY OF ST	TATE USE ON	David D. Welsberg		

Form No. 632 Revised: 01/2012