



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. 107267		2. Exact name of the limited liability company A.E. White, L.L.C			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Acquiring, Leasing, developing, selling and otherwise dealing in real property			
5. Principal office address 8 Bartlett Road		City Middletown	State RI	Zip 02842	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Susan A White		Contact Title Trustee of the Susan A White Rev TR dtd 2/23/91			
Street Address 8 Bartlett Road		City Middletown	State RI	Zip 02842	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name Susan A. White, Ttee of the Susan A White Rev Tr		Manager Name			
Street Address 8 Bartlett Road		Street Address			
City Middletown	State RI	Zip 02842	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 currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

2013 OCT 18 AM 11:18
 SECRETARY OF STATE
 CORPORATIONS DIV

FILED
OCT 18 2013
 BY 5679

File Date _____
 Check No _____
 By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Susan White 10/13/13
 Signature of Authorized Person Date
Susan A White
 Print or Type Name of Authorized Person