

## 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

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## 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				
727455	153 HAWTHORNE STREET, LLC				
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Own and manage real estate				
5. Principal office address 567 Charles Street			City Providence	State <b>RI</b>	Zip <b>02904</b>
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT P	ERSON:	
Contact Name Marc lannotti			Contact Title		
Street Address 567 Charles Street			City Providence	State <b>RI</b>	<sup>Zip</sup> <b>02904</b>
7. LIST <u>ALL</u> MANAGERS ( "X" BOX FOR ATTACH		PRESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO	NOT LIST MEMBERS
Manager Name <b>Marc lannotti</b>			Manager Name		
Street Address same as above			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN R	HODE ISLAND				
This information is curren	tly of record in th	e Office of the Sec	retary of State. Changes require t	iling Form 642.	
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## FILED

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

OCT 2 I, 2013

Under penalty of berjury, 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.

Marc lannotti

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012