

## 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. 143601	2. Exact name of the limited liability company DOCKSIDE PROPERTIES, LLC					
3. State of Formation		Brief description of the character of business conducted in Rhode Island     Real estate				
5. Principal office address 73 FERRY LANE			City BARRINGTON	State <b>RI</b>	Zip <b>02806</b>	
6. MAILING ADDRESS OF	LIMITED LIABILE	TY COMPANY AND	NAME OF TITLE OF CONTACT PE	RSON:	Control of the contro	
Contact Name HENRY BLADE			Contact Title MEMBER			
treet Address 73 FERRY LANE			City BARRINGTON	State RI	Zip <b>02806</b>	
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH		HESSES) OF THE	LIMITED LIABILITY COMPANY, IF A	(PPLICABLE - <u>Do</u>	NOT LIST MEMBERS	
Manager Name NONE			Manager Name NONE			
Street Address			Street Address			
City	State	Zip	City	State	Zio	
Manager Name None	I		Manager Name None			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN R						
this information is curren	itly of record in the	e Office of the Seci	retary of State. Changes require fili	ng Form 642.	,	

## FILED

OCT 2 4 2013

BY <i>30</i>	2	
File Date  Check No  By:	Under penalty of perjury, I declare and affirm to this report, including any accompanying schedard that all statements contained herein are to Signature of Authorized Person  HENRY BLADE, Member	dules and statements
FOR SECHETARY OF STATE USE ONLY	Print or Type Name of Authorized Person	

Form No. 632 Revised: 01/2012 Will RA 10/7/13