

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. 149367	2. Exact name of the limited liability company JM Potter Enterprises, LLC				
3. State of Formation Rhode Island	To Acqui	re, hold, use, n	ter of business conducted in Rho nanage, sell, convey, leas eal estate and personal p	se, mortgage, ple	dge, or otherwise
5. Principal office address 18 Verndale Street			City Warwick	State RI	Zip 02886
6. MAILING ADDRESS OF L	MITEO LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:	
Contact Name John M. Potter			Contact Title Manager		
Street Address 18 Verndale Street			City Warwick	State RI	Zip 02886
7. LIST <u>ALL</u> MANAGERS (N ("X" BOX FOR ATTACHM	AMES AND ADDI	RESSES) OF THE I	IMITED LIABILITY COMPANY,	IF APPLICABLE - <u>Do</u>	NOTE IST MEMBER
Manager Name , Poster			Manager Name		
Street Address & Verypa City Warwi UL	1 stree	t	Street Address		
WANU: UL	State	0) 2859	City	State	Zip
Manager Name			Manager Name	AND A T. St. T. St. T. St. St. St. St. St. St. St. St. St. St	•
Street Address			Street Address		
Dity	State	Zip	City	State	Zip
. RESIDENT AGENT IN RHO	Nagh ga mailt ad a na chiaidh na aiti				
his information is currently	of record in the	Office of the Secre	etary of State. Changes require	filing Form 642.	

FILED

NOV 05 2013	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.		
Check No.	John M Pattu 10/13/13 Signature of Authorized Person Date		
FOR SECRETARY OF STATE USE ONLY	John M. Potter Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012