State of Rhode Island and Providence Plantations Fee: \$50. Office of the Secretary of State				
Superior State	Division Of Business 148 W. River S Providence RI 0290 (401) 222-304	reet 4-2615		
Limited Liability Com Annual Report Filing Period: September 1				
	7-16-66(d), each limited liability comp n thirty (30) days after the time presc penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	<u>2013</u>			
1. ID No. <u>000156935</u>	<u>i</u>			
2. Exact Name of the Limited Liability Company Intrepid Enterprises, LLC				
3. State of Formation				
State: <u>RI</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
PROPERTY MANAGE	MENT AND ACQUISITION			
5. Principal Office Addres	SS			
No. and Street: <u>124</u>	A JOHNSON RD			
City or Town: FOS	STER State:]	<u>L</u> Zip:	<u>02825</u>	Country: <u>USA</u>
6. Mailing Address of Lin	nited Liability Company and Name	or Title of	Contact Po	erson:
	L W. CHIPPENDALE Contact Title:	<u>OWNER</u>		
No. and Street: <u>124 A</u> City or Town: <u>FOS</u>	<u>JOHNSON ROAD</u> <u>TER</u> State	:: <u>RI</u> Zip	o: <u>02825</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name		Addr	ress
	First, Middle, Last, Suffix	Address,	City or Town, S	State, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
MICHAEL W. CHIPPENDALE 124 A JOHNSON ROAD FOSTER, RI 02825-				
9. This report must be ex	ecuted by an authorized person p	ursuant to	R.I.G.L. 7-1	16-66 (b).

Signed this 28 Day of January, 2014 at 11:47:15 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or*

acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By <u>CLIFFORD FERREIRA JR</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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