

## 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.

791722	2. Exact na Extreme	2. Exact name of the limited liability company Extreme Properties, LLC				
3. State of Formation	Brief description of the character of business conducted in Rhode Island					
Rhode Island	Ownership of Real Estate					
5. Principal office address 21 Garden City Drive			City Cranston	State RI	Zip <b>02920</b>	
6 MAILING ADDRESS OF Contact Name Glenn Teolis	LIMITED LIABILI	RACOMPANY/AND	VAMEOR TITLE OF CONTACT Contact Title	PERSON		
Street Address 1075 Scituate Avenue			City Cranston	State RI	Zip <b>02920</b>	
7. LIST ALL MANAGERS ( ("X" BOX FOR ATTACH	NAMES AND ADI	RESSES) OF THE	LIMITED LABILITY COMPANY	IF APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN RI	HODE ISLAND	Hade Income to The				
This information is current	lly of record in th	e Office of the Seci	etary of State. Changes require	filing Form 642.		

## FILED

FEB 1 0 2014

File Date	20773
Check No	<u></u>
	₹
By:	<b>)</b>
	طعاعات
FOR SECRETARY OF STATE USE ONLY	20000

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.

Signature of Authorized Person

Date

Glenn Teolis

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012