

## 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

2009

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				
000148317	Oliveyulle Housing Development Company LLC  4. Brief description of the character of business conducted in Rhode Island				
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island				
RI	Development and sale of Affordable Housing  City Prov State Zip 02908				
5. Principal office address 66 Chaft	: (+		City Prov	State	Zip 02909
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Contact Name Frank	Shea		Contact Title  Ex. D. CCTOC  City State Zip		
Street Address 66 Chatte			city proveder	バニ Rエ	Zip 02909
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		2014
Street Address			Street Address		
City	State	Zip	City	State	Zip —
				Winn Form C42	
This information is currently of	record in the Off	ice of the Secretary of	State. Changes require t	iling Form 642.	াড় ট
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FILED

MAR 14 2014 By 419 - 219980 A.A. 12':31 p.m.



Form No. 632 Revised: 01/2012 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 DI PORT

Print or Type Name of Authorized Person