

**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 2014

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. <i>524240</i>		2. Exact name of the limited liability company SONOMA PROPERTIES OF RI, LLC			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island PURCHASE, SALE, INVESTMENT IN REAL ESTATE			
5. Principal office address 104 NAPLES AVENUE		City PROVIDENCE		State RI	Zip 02908
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name COREY FONTES		Contact Title MEMBER			
Street Address 104 NAPLES AVENUE		City PROVIDENCE		State RI	Zip 02908
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT)					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

MAR 21 2014

BY *096*

File Date _____
 Check No. _____
 By: _____
FOR SECRETARY OF STATE USE ONLY

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.

Corey Fontes 2/20/14
 Signature of Authorized Person Date

COREY FONTES
 Print or Type Name of Authorized Person