

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. 000794027	2. Exact name of the limited liability company Russell C. Hryzan, LLC					
3. State of Formation	Brief description of the character of business conducted in Rhode Island Real Estate Holding					
5. Principal office address 236 California Ave			City Providence	State RI	Zip 02905	
. MAILING ADDRESS OF LI	MITED LIABILIT	Y COMPANY AND I	NAME OR TITLE OF CONTACT P	ERSON:		
Contact Name Russell C. Hryzan			Contact Title CEO/CFO			
Street Address PO Box 6527			City Providence	State RI	Zip 02940	
7. LIST <u>ALL</u> MANAGERS (N. ("X" BOX FOR ATTACHMI		RESSES) OF THE L	LIMITED LIABILITY 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	L .,.		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip 🚍 💍	
B. RESIDENT AGENT IN RHO	ODE ISLAND				あ と ご	
This information is currently	y of record in the	FILE JUN 16 By ARA	2014 198 3:10p.m.	ming Form 642.	PH 3: 09	
File Date			this report, including and that all statemen	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. O6/16/2014 Signature of Authorized Person Date		
By:FOR SECRETARY OF STA			Russell C. hryza Print or Type Name of	m	Date	

Form No. 632 Revised: 01/2012