

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. 145031		2. Exact name of the limited liability company ANGELL FARM ESTATES, LLC											
3. State of Formation		,		of business conducted in Rhode Island									
5. Principal office address 5 PINE LANE			City										
	FLIMITED LIABILE	TY COMPANY AND	NAME OF THE OF CONTACT P	ERSON:									
Contact Name ANTHONY REO			Contact Title MEMBER										
Street Address 5 PINE LANE	***		City JOHNSTON										
7- LIST ALL MANAGERS ("X" BOX FOR ATTAC		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - <u>Do</u>	NOT LIST MEMBERS								
Manager Name		, ii is ii ii ii ii i ja	Manager Name										
Street Address			Street Address	Street Address									
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Form No. 632 Revised: 01/2012

Under penalty of perjury, I declare and affire	n that I have examined
this report, including any accompanying sc	hedules and statements,
and that all statements contained herein are	true and correct.
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	/ ~) ~/

Signature of Authorized Person

Date

ANTHONY REO

Print or Type Name of Authorized Person