

STATE OF RHODE IGLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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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. 791314	2. Exact na ANOKA	2. Exact name of the limited liability company ANOKA INVESTMENTS, LLC				
3. State of Formation	4. Brief des	Scription of the characte	er of husiness conducted in Dha	1-1-1-1		
Rhode Island	to own,	Brief description of the character of business conducted in Rhode Island to own, manage, buy and sell real estate				
5. Principal office address P.O. Box 255			City Barrington	State FEI	Zip 02806	
B. MANUAL PRESS (C	F LIMITED LIABILI	TY COMPANY AND N	AME OR TITLE OF CONTACT F	ERSON:		
Contact Name Yvonne S. Weiss			Contact Title Manager			
Street Address 23 Nayatt Road			City Barrington	State RI	Zip 02806	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTAC	(NAMES AND ADI	PRESSES) OF THE LI	MITED LIABILITY COMPANY, II	APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name Yvonne S. Weiss			Manager Name			
Street Address 23 Nayatt Road			Street Address			
City	State RI	Zip 02806	City	State	Zip	
Barrington	į ISI	7-000		Manager Name		
	KI		Manager Name			
fanager Name	, N		Manager Name Street Address			
Manager Name Street Address	State	Zip		State	Zip	
Barrington Manager Name Street Address City RESIDENT AGENT IN F	State		Street Address	State	Zip	

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	سلام سوري برخوري ها دراه ميديده و بساعته المواجعة والمستقدات الموا		
File Date	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.		
Ry:	Signature of Authorized Person Date		
FOR SECRETARY OF SYATE USE ONLY	YVONNE S. WEISS		
	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012