

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.		2. Exact name of the limited liability company Providence Realty Investment, LLC				
507164	Provider					
3. State of Formation	4. Brief desc	Brief description of the character of business conducted in Rhode Island				
Rhode Island	Real esta	Real estate investment company				
5. Principal office address 30 Exchange Terrace - 2nd Floor			City Providence	State RI	Zip 02903	
6. MAILING ADDRESS OF	FLIMITED LIABILIT	Y COMPANY AND NA	AME OR TITLE OF CONTACT P	ERSON:		
Contact Name Michael Hennessey			Contact Title Member			
Street Address 30 Exchange Terrace - 2nd Floor			City Providence	State RI	Žip 02903	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACK	(NAMES AND ADD	RESSES) OF THE LI	MITED LIABILITY COMPANY, IF	FAPPLICABLE - <u>Do</u>	NOT LIST MEMBERS	
Manager Name Raymond Uritescu			Manager Name Michael Hennessey			
Street Address 30 Exchange Terrace - 2nd Floor			Street Address 30 Exchange Terrace - 2nd Floor			
City Providence	State RI	Zip 02903	City Providence	State RI	0290 <u>3</u> w	
Manager Name			Manager Name			
Street Address			Street Address — <			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN I						
This information is curre	ntly of record in th	e Office of the Secret	tary of State. Changes require	filing Form 642.		

FILED SEP **12** 2014

File Date		
Check No	· .	
Ву:	···	
FOR SECRETAR	Y OF ST	ATE USE ONLY

Under penalty of perjury, I declare and a this report, including any accompanying and that all statements contained herein	g schedules and statements,
hullen	9/11/14
Signature of Authorized Person	Date
William R. Landry	
Print or Type Name of Authorized Person	

Form No. 632 Revised: 01/2012