

## 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.	3	2. Exact name of the limited liability company					
149527	815 Res	815 Reservoir Avenue LLC					
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island					
Dhada lalaad	real estate ownership and management						
Rhode Island		•	-				
5. Principal office address	pal office address		City	State	Zip		
400 Reservoir Avenue, Suite 2H			Providence	RI	02907		
6. MAILING ADDRESS OF LIX	ITED LIABILI	Y COMPANY AND NA	ME OR THE OF CONTACT PERSO	N:			
Contact Name Nathaniel B.Baker		Contact Title  Manager					
Street Address 86 St. James Court			City Palm Beach Gardens	State FL	Zip 33418		
7. LIST <u>ALL</u> MANAGERS (NAI ("X" BOX FOR ATTACHMEN		RESSES) OF THE LI	MITED LIABILITY COMPANY, IF APPL	ICABLE - <u>DO</u>	NOT LIST MEMBERS		
Manager Name Nathaniel B. Baker Street Address 86 St. James Court			Manager Name Street Address				
							City Palm Beach Gardens
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN RHOL	ical instrumental instrumental account						
This information is currently o	of record in the	e Office of the Secreta	ary of State. Changes require filing F	orm 642.	1		
	-			·			

## **FILED**

SEP 22 2014

File Date BY	KL932772	Under penalty of perjury, I declare this report, including any accomp	
Check No	4.28	Signature of Authorized Person	9 / 8 / 4 Date
FOR SECRETARY OF STATE USE ONLY		Nathaniel B. Baker M	LNDSGT
		Print or Type Name of Authorized Pe	erson <i>O</i>

Form No. 632 Revised: 01/2012