

## 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. 292879		2. Exact name of the limited liability company 1150, LLC  4. Brief description of the character of business conducted in Rhode Island Real Estate				
3. State of Formation  Rhode Island						
5. Principal office address 1062 Reservoir Avenue			City Cranston	State RI	Zip <b>02910</b>	
	FLIMITED LABILT	Y COMPANY AND	NAME OF TITLE OF CONTAC	T PERSON:	Service y	
Contact Name Sergio DeSimone			Contact Title  Member			
Street Address 601 Hope Road			City <b>Hope</b>	State RI	Zip <b>02831</b>	
7 LIST ALL MANAGERS ("X" BOX FOR ATTACK	(NAMES AND ADD HMENT) 🔲	IRESSES) OF THE	LIMITED LIABILITY COMPAN	( JF APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8, RESIDENT AGENT IN F	RHODE ISLAND				l .	
This information is curre	ntly of record in the	Office of the Secr	retary of State. Changes requi	re filing Form 642.		

FILED

SEP 2 4 2014

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File Date	Under penalty of perjury, I declare and affirm that I have exame this report, including any accompanying schedules and state and that all statements contained herein are true and correct.		
Check No.	9.17. Signature of Authorized Person Date	<u> 14</u>	
FOR SECRETARY OF STATE USE ONLY	Sergio DeSimone		
	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012