

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		Exact name of the limited liability company 1150, LLC 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 02910		
	LIMITED LIABILE	Y COMPANY AND	NAME OF TITLE OF CONTAC	T PERSON:			
Contact Name Sergio DeSimone			Contact Title Member				
Street Address 601 Hope Road			City Hope	State RI	Zip 02831		
7 LIST ALL MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD MENT)	RESSES) OF THE	LIMITED LIABILITY COMPANY	(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 R	HODE ISLAND		l ma				
This information is curren	tly of record in the	Office of the Secr	retary of State. Changes requir	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 examined this report, including any accompanying schedules and statements contained herein are true and correct.		
Check No.	Signature of Authorized Person Date	<u>7.14 </u>	
FOR SECRETARY OF STATE USE ONLY	Sergio DeSimone		
	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012