

## 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. 147751	Exact name of the limited liability company     JMR Properties, LLC					
3. State of Formation	4. Brief desc	cription of the charac	cter of business conducted in Rho	ode Island		
Rhode Island	Real Est	•				
5. Principal office address 40 Malbone Street			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:		
Contact Name Stephen M. Miller			Contact Title  Member			
Street Address 40 Malbone Street			City <b>Warwick</b>	State RI	Zip <b>02888</b>	
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - <u>Do</u>	NOT LIST MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name	ager Name		Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN F	The state of the same of the same					
This information is curre	ntly of record in th	e Office of the Sec	retary of State. Changes requir	e filing Form 642.		

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FOR SE	CRETARY OF STATE USE ONLY	

Form No. 632 Revised: 01/2012 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.

Signature of Authorized Person

Print or Type

Signatur of Adalonized Person

Name of Authorized Person

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