

## 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.<br>104911                                   | 2. Exact name of the limited liability company THE HERRINGTON LLC   |                      |                               |   |                     |
|--|---|----------------------|-------------------------------|---|---------------------|
| 3. State of Formation  Rhode Island                          | Brief description of the character of business conducted in Rhode Island     Purchase, sale and management of real and/or personal property |                      |                               |   |                     |
| 5. Principal office address 215 April Lane                   |   |                      | City<br><b>Tiverton</b>       | State<br>RI                               | Zip<br><b>02878</b> |
| 6 MAIEING ADDRESS OF LIV<br>Contact Name<br>Bruce D. Randall |   | ACOMPANY AND N       | Contact Title                 | Dairone - 1475                            |                     |
| Street Address<br>215 April Lane                             |   |                      | City<br>Tiverton              | State<br><b>RI</b>                        | Zip<br><b>02878</b> |
| 7/ LISTEALL MANAGERS (NA                                     | VES AND ADD   | RESSES) OF THE LI    | MITED CABIBLEAR OMPANY,       | IF APPLICABLE - DO                        | NOTEST MEMBERS      |
| Manager Name<br>Bruce D. Randall                             |   |                      | Manager Name                  |   |                     |
| Street Address 215 April Lane P.O. Box 6/3                   |   |                      | Street Address                |   |                     |
| City<br>Tiverton   | State<br>RI   | Zip<br><b>02878</b>  | City                          | State                                     | Zip                 |
| Manager Name   |   |                      | Manager Name                  |   |                     |
| Street Address   |   |                      | Street Address                |   |                     |
| City   | State   | Zip                  | City                          | State                                     | Zip                 |
| 8. RESIDENT AGENT IN RHO                                     | EISLAND 4   |                      | <b>作的</b> 基本主义                | 1. S. |                     |
| This information is currently o                              | of record in the  | Office of the Secret | ary of State. Changes require | e filing Form 642.                        |                     |

FILED

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

Bruce D. Randall

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012