

## 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.		2. Exact name of the limited liability company				
147915	Gemma	Gemma Family Real Estate, LLC				
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Purchase	Purchase, hold, develop, sell and rent real estate				
5. Principal office address One Wellington Road			City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>	
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:		
Contact Name Kevin M. Daley, Esq.			Contact Title Attorney			
Street Address 300 Jefferson Boulevard, Suite 105			City <b>Warwick</b>	State RI	Zip <b>02888</b>	
7. LIST <b>ALL</b> MANAGERS ( "X" BOX FOR ATTACH		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			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8: RESIDENT AGENT IN R						
This information is curren	tly of record in th	e Office of the Sec	retary of State. Changes require	e filing Form 642.		

FILED

OCT 1 4 2014

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.

Check No

By:

Len Gemma

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012