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		
507687	COMMUNITY PROPERTIES MANAGEMENT, LLC		
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island		
RHODE ISLAND	TO ENGAGE IN BUSINESS ACTIVITIES INCLUDING, BUT NOT LIMITED TO THE ACQUISTIC DEVELOPMENT, MANAGEMENT AND/OR SALE OF REAL ESTATE		
5. Principal office address: 97 HOPKINS AVENUE	City: JOHNSTON	State: RI	Zip: 02919

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON

Contact Name	Contact Title		
KAN BAO VANG	MANAGER		
Street Address: 97 HOPKINS AVENUE	City: JOHNSTON	State: RI	Zip: 02919

7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
("X" BOX FOR ATTACHMENT) ☐

Manager Name: KAN BAO VANG			Manager Name		
Street Address: 97 HOPKINS AVENUE			Street Address		
City: JOHNSTON	State: RI	Zip: 02919	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. RESIDENT AGENT IN RHODE ISLAND
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.

FILED

OCT 14 2014

11:49

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.

Kan Bao Vang — 10.7.14
Signature of Authorized Person — Date

KAN BAO VANG, MANAGER
Print or Type Name of Authorized Person

File Date
Check No.
By:
FOR SECRETARY OF STATE USE ONLY

Form No. 632
Revised: 01/2012