

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. 540812	Pinerid	2. Exact name of the limited liability company Pineridge Sports Park, LLC				
3. State of Formation Rhode Island	Brief description of the character of business conducted in Rhode Island Sports Park					
5. Principal office address 1150 Oaklawn Avenue			City Cranston	State RI	Zip 02920	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND Contact Name Alex Dowlatshahi			NAME OR TITLE OF CONTACT PERSON: Contact Title Member			
Street Address 1150 Oaklawn Avenue			City Cranston	State RI	Zip 02920	
("X" BOX FOR ATTACH	MENT)	ORESSES) OF THE	LIMITED LIABILITY COMPANY, Manager Name	IF APPLICABLE - <u>Do</u>	NOT LIST MEMBI	
treet Address			Street Address			
ity	State	Zip	City	State	Zip	
anager Name			Manager Name			
treet Address			Street Address			
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RESIDENT AGENT IN RH	ODE ISLAND		etary of State. Changes require		gasana a Marawa ka para ka sa	

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ile Date Check No IV: OR SECRETARY OF STATE USE ONLY	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 Date Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012