

## 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. 155227		2. Exact name of the limited liability company PEACEDALE PARTNERS, LLC				
3. State of Formation RHODE ISLAND	j	4. Brief description of the character of business conducted in Rhode Island REAL ESTATE INVESTMENT AND PROPERTY MANAGEMENT				
5. Principal office address 13 WHAT CHEER ROAD			City NARRAGANSETT	State RI	Zip <b>02882</b>	
6. MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT PERS	ON:		
Contact Name ROBERT DONFRANCESCO			Contact Title MEMBER			
Street Address 13 WHAT CHEER ROAD			City NARRAGANSETT	State RI	Zip <b>02882</b>	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF AP	PLICABLE - <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	HODE ISLAND					
This information is curren	itly of record in th	e Office of the Secr	retary of State. Changes require filing	Form 642.		

FILED

OCT 2 0 2014

BY

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

0/13/14 Date

ROBERT DONFRANCESCO
Print or Type Name of Authorized Person

FOR SECRETARY OF STATE USE ONLY

Form No. 632 Revised: 01/2012

File Date \_ Check No