

## 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. 113923	2. Exact name of the limited liability company E-BUSINESS PROPERTIES, LLC				
3. State of Formation  RHODE ISLAND	4. Brief description of the character of business conducted in Rhode Island ENGAGE IN BUSINESS OF INVESTING IN REAL ESTATE, SECURITIES OR OTHER BUSINESS VENTURES				
5. Principal office address 530 EAST SHORE ROAD			City JAMESTOWN	State RI	Zip <b>02835</b>
6. MAILING ADDRESS OF LIMIT	ED LIABILITY C	OMPANY AND N	AME OR TITLE OF CONTACT PE	RSON:	
Contact Name MICHAEL A. ROCCHIO			Contact Title MANAGER		
Street Address 530 EAST SHORE ROAD			City JAMESTOWN	State <b>RI</b>	<sup>Zip</sup> <b>02835</b>
7. LIST <u>ALL</u> MANAGERS (NAME ("X" BOX FOR ATTACHMENT)	S AND ADDRES	SSES) OF THE LI	MITED LIABILITY COMPANY, IF A	APPLICABLE - <b>DO</b>	NOT LIST MEMBERS
Manager Name MICHAEL A. ROCCHIO			Manager Name		
Street Address 530 EAST SHORE ROAD			Street Address		
City JAMESTOWN	State <b>RI</b>	Zip <b>02835</b>	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
Dity	State	Zip	City	State	Zip
B. RESIDENT AGENT IN RHODE	ISLAND				
FILED		ice of the Secret	ary of State. Changes require fili	ng Form 642.	SECRETARY OF CORPORATION
OCT 22 2014 BY M 23482	5				ONS DIV
File Date 7491	<del></del>			ny accompanying s	
Check No 749 /	<del> </del>		mutal		cul 10120
Ву:			Signature of Authorized Person Date		
FOR SECRETARY OF STATE USE ONLY			MICHAEL A. ROCCHIO, MANAGER  Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012