

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 t	he limited liability comp	pany												
127825	LOST RIVER, LLC														
3. State of Formation	4. Brief description	of the character of bu	usiness conducted in Rhode Island												
RI	\mathcal{E}	eal t	Estate Investments												
5. Principal office address 2/6 Ghay CRO	us Roa	d	Middletown	State KI	7ip 02 8 42										
6. MAILING ADIPHESS OF LIMIT	ED LIABILITY CO	RITHE OF CONTACT PERSON	to desire the second												
Contact Name. FIN ANOW F.	Nicolett	'a	Contact Title												
Street Address	eerig Ro		Middletoun	State	2ip 02842										
7. LIST ALL MANAGERS (NAM ("X" BOX FOR ATTACHMENT	S AND ADDRESS	TERRET TO THE PROPERTY OF THE PROPERTY OF THE PARTY OF TH	LABILITY COMPANY IF APPLI	CABLE - <u>DO NO</u> T	. UST MENNERS										
Manager Name Free! H I	Bannews	s IV	Manager Name None												
Street Address	001- FL	al Ave	Street Address												
City Middle town	State RT	2ip 02842	City	Zip											
Manager Name			Manager Name												
Street Address			Street Address												
City	State	Zip	City	State	Zíp										
BURESIDENT AGENT IN RECOR			i de frontamento de comencia de la c												
This information is currently of	record in the Offic	e of the Secretary of	State. Changes require filing Fo	orm 642.											

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Form No. 632 Revised: 01/2012 Under penalty of perjury 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

Andrew F/ Nicoletta

Print or Type Name of Authorized Fer