

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

Filing Period: September 1 - November 1 - Filing Fee: \$50.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. 1D No. 1595 2 9		xacı name of the limited liability company BIGELOW REALTY, LLC					
3. State of Formation 4. Brief description of the character of the busin Real estate management				ness which is actually conducted in Rhode	s Island		
5. Principal office address 2244 Pawtucket Avenue				City East Providence	State RI	χіρ 02914	
6. MAILING ADDRE Contact Name Stephen J. DiGian			COMPANY AND I	Contact Title Attorney	PERSON:		
Street Address 50 Park Row West, Suite 111				City Providence, RI	State RI	^{Zip} 02903	
7. NAME AND ADDI	RESS OF		OF THE LIMITED ES BEFORE USING	LIABILITY COMPANY, IF APPL GATTACHMENTS ("X" BOX FO	ICABLE - <u>DO NOT</u> R ATTACHMENT)		
Manager Name Dennis J. Bigelow				Manager Name			
Street Address 2244 Pawtucket Avenue				Street Address			
сцу East Providence		State Rl	<i>Ζψ</i> 02914	City	State	Zip	
Manager Name	····	-, ··		Manager Name			
Street Address				Street Address			
City		State	Zip	City	State	Zip	
8. RESIDENT AGENT This information is cu			e of the Secretary of	State. Changes require filing of Fo	orm 642 - R.I.G.L. 7-1		
00 ву_ <i>Си</i>		D 2014 34946 This report must	be executed by an o	authorized person pursuant to R.	I.G.L, 7-16-66 (b).	ECKETANY OF STATE CORPORATIONS DIV	

159529

File Date	
Check No.	and the state of t
Ву:	
	FOR 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

Dennis J. Bigelow

Print or Type Name of Authorized Person

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