

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 the limited liability company Turk Commercial Realty, LLC				
135589	Turk Co					
3. State of Formation	4. Brief desc	Brief description of the character of business conducted in Rhode Island Real Estate.				
Rhode Island	Real Est					
5. Principal office address 1865 Post Road, Suite 201			City Warwick	State RI	Zip 02886	
6. MAILING ADDRESS OF	LIMITED LIABILE	TY COMPANY AND NA	AME OR TITLE OF CONTACT	PERSON:		
Contact Name Brad J. Turchetta DMD			Contact Title Manager			
Street Address 1865 Post Road, Suite 201			City Warwick	State RI	Zip 02886	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH		PRESSES) OF THE LI	MITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name Brad J. Turchetta			Manager Name			
Street Address 1865 Post Road, Sui	ite 201		Street Address		***	
City Warwick	State RI	Zip 02886	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN R				<u> </u>		
This information is curren	tly of record in th	e Office of the Secret	ary of State. Changes requir	e filing Form 642.		

FILED OCT 3 0 2014 50 27

	Under penalty of perjury, I declare and affirm that I have examine	đ		
File Date	this report, including any accompanying schedules and statemen	nts		
110 8410	and that all statements contained herein are true and correct.			
Check No	10/24/14			
Ву:	Signature of Arthorized Person Date			
FOR SECRETARY OF STATE USE ONLY	Brad J. Turc he tta DMD			
FUN SECRETARY OF STATE USE UNLI	Print or Type Name of Authorized Person			

Form No. 632 Revised: 01/2012