

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2009

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. 000131430	2. Exact nam Route 21	ne of the limited fiab	ility company		
3. State of Formation Rhode Island		ription of the charac ite Developme	cter of business conducted in Rhodont	e Island	
5. Principal office address 46 Taugwonk Spur Road, Unit 8			City Stonington	State CT	Zip 06378
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND N Contact Name John C. D'Amato, Jr.			NAME OR TITLE OF CONTACT PERSON: Contact Title Member		
Street Address 46 Taugwonk Spur Road, Unit 8			City Stonington	State CT	Zip 06378
7. LIST <u>ALL</u> MANAGERS (N ("X" BOX FOR ATTACHMI		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO	NOT LIST MEMBERS
Manager Name 27			Manager Name		
treet Address			Street Address		
City	Qtatn	7in	ity	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
Dity	State	Zip	City	State	Zip
RESIDENT AGENT IN RHO		Office of the Sec		Him Fam 640	
na momacon is currently	, or record in the	F NOV By	ILED 14 2014 316511 1. T. Back. M) -	TOTA NOV 14 AM 10: 25
File Date			Under penalty of period this report/including and that all/statement Signature/of Authorized	any accompanying a ts contained herein a	firm that I have examined schedules and statement are true and correct. 01/30/2013 Date
By: FOR SECRETARY OF STATE	John C. D'Amato, Jr.				

Form No. 632 Revised: 01/2012