



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. 797944		2. Exact name of the limited liability company Salt Pond Properties, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island The purchase, sale and leasing of real estate and any business permitted limited liability companies under the Act.			
5. Principal office address 101 Cross Street Extension		City Westerly	State RI	Zip 02891	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Kevin Adams		Contact Title Member			
Street Address 101 Cross Street Extension		City Westerly	State RI	Zip 02891	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS (“X” BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name None		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

NOV 24 2014

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File Date _____
 Check No. _____
 By _____
 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

Date

Kevin Adams

Print or Type Name of Authorized Person

11-20-14

WRITTEN CONSENT OF MEMBERS
Salt Pond Properties, LLC

The undersigned, being of all of the members of **Salt Pond Properties, LLC** a Rhode Island limited liability company authorized to do business in the state of Rhode Island hereby takes the following action by written consent in accordance with Section 7-16-21 of the Rhode Island General Laws:

1. The notice required for a special or annual meeting is hereby waived, and the within consent shall take the place of holding such meeting.
2. The office of the registered agent is Michael P. Lynch, Esquire, at 117 High Street, P.O. Box 761, Westerly, RI 02891.
3. The annual filing for 2014, a copy of which is attached hereto, is approved as to be filed with the Rhode Island Secretary of State.

EXECUTED and made effective as of this 1st day of November, 2014.

Witness




Kevin G. Adams