

## 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 <u>2015</u>

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 nar	2. Exact name of the limited liability company				
517904	Caraddie Real Estate, LLC					
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island HOLD REAL ESTATE				
RHODE ISLAND	HOLD RI	AL ESTATE				
Principal office address     146 Chadsey Road			City North Kingstow	State RI	Zip <b>02852</b>	
6. MAILING ADDRESS O	F LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT PERS	SON:		
Contact Name Jeffrey C. Smith			Contact Title			
Street Address 146 Chadsey Road			City North Kingstown	State <b>RI</b>	Zip <b>02852</b>	
7. LIST ALL MANAGERS ("X" BOX FOR ATTAC		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF AF	PPLICABLE - DO	NOT LIST MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
		T=:	0.00			
City	State	Zip	City	State	Zìp	
	State	Zip	Manager Name	State	Zip	
Manager Name	State	Zip	*	State	Zip	
Manager Name Street Address City	State	Zip	Manager Name	State	Zip	
Manager Name Street Address	State		Manager Name Street Address			

**FILED** 

SEP 2 1 2015

VI <del></del>			
File Date	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.		
Ву:	Signature of Authorized Person Date  Jeffrey C. Smith		
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012