

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 2015

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. 543148	HÕÕSING	HOUSING PRESERVATION GROUP, LLC				
3. State of Formation	4. Brief desc To engag	4. Brief description of the character of business conducted in Rhode Island To engage in any business permitted LLC's under the Act				
5. Principal office address 45 EAST LANTERN ROAD			City SMITHFIELD	State RI	Zip 02917	
Contact Name STEPHEN O PIZZO JR			Contact Title MEMBER			
Street Address 45 EAST LANTERN ROAD			City SMITHFIELD	State RI	Zip 02917	
				a property	y source du comment	
Manager Name STEPHEN O PIZZO			Manager Name			
Street Address 45 EAST LANTERN	ROAD		Street Address			
City SMITHFIELD	State RI	Zip 02917	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
The second secon				Fig. 7	en e	
This information is curre	ently of record in the	e Office of the Secre	tary of State. Changes require t	iling Form 642.		

FILED

SEP 2 1 2015

elishir bebar 19	rakan kemala dalah keraja di adi baharan di dia
Male Carlo	
This was businesses	
4	
A STATE OF S	The harden statement and the statement of the statement o
100	THE PERSON NAMED IN COLUMN
A Section	
do in the	mental and the state of the sta
12 37 22 1	

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

STEPHEN O. PIZZO, JR.

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012