

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.		2. Exact name of the limited liability company				
89993	Gano Ho	Gano Holdings, LLC				
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Real Est	ate				
5. Principal office address 1140 Reservoir Avenue			City Cranston	State RI	Zip 02920	
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:		
Contact Name Elizabeth A. Procaccianti			Contact Title Managing Member			
Street Address 1140 Reservoir Avenue			City Cranston	State RI	Zip 02920	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH		PRESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LIST MEMBERS	
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 F	HODE ISLAND	1	<u>-</u>	<u> </u>		
This information is currer	ntly of record in the	e Office of the Sec	retary of State. Changes require	e filing Form 642.		

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.

EHI Gano Holdings, Inc. its Member By

Signature of Authorized Person

Print or Type Name of Authorized Person Elizabeth A Proceculanh

Form No. 632 Revised: 01/2012