

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 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.

Rhode Island 5. Principal office address 60 South County Commons Way, Suite G4 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Charles A. Coolridge III Street Address 148 Brattle Street 7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT. LIST NEMB ("X" BOX FOR ATTACHMENT) Manager Name Charles A. Coolridge III Street Address 148 Brattle Street City Cambridge Manager Name Street Address 15treet Address 15treet Address Street Address City State MA Street Address	1, Entity ID No. 124914	Matunuci	2. Exact name of the limited liability company Matunuck Acres Farm, LLC				
5. Principal office address 60 South County Commons Way, Suite G4 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Charles A. Coolridge III Street Address 148 Brattle Street 7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMB ("X" BOX FOR ATTACHMENT) Manager Name Charles A. Coolridge III Street Address 148 Brattle Street City Cambridge Street Address 148 Brattle Street City Cambridge Manager Name Street Address 15treet Address	3. State of Formation		·				
60 South County Commons Way, Suite G4 60 South County Company: Contact Title Contact Title Contact Title City Cambridge City Cambridge MA	Rhode Island				_		
Contact Name Charles A. Coolridge III Street Address 148 Brattle Street City Cambridge MA State MA O2138 7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMB ("X" BOX FOR ATTACHMENT) Manager Name Charles A. Coolridge III Street Address 148 Brattle Street City State MA O2138 City State Street Address Manager Name City State Street Address Street Address Street Address City State Zip Manager Name Street Address City State Zip	60 South County Commons Way, Suite G4			Wakefield	RI	02879	
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Manager Name Charles A. Coolridge III	Street Address 148 Brattle Street			Cambridge	MA	02138	
Charles A. Coolridge III Street Address 148 Brattle Street City Cambridge MA Zip 02138 City Manager Name Manager Name Street Address City City City City City City City Ci	7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTAC	(NAMES AND ADD HMENT) [RESSES) OF THE LII	MITED LIABILITY COMPANY, II	FAPPLICABLE - DO	NOT LIST MEMBERS	
Take Brattle Street City Cambridge MA	Manager Name Charles A. Coolride	ge III		Manager Name	Manager Name		
Cambridge MA 02138 Manager Name Street Address City State Zip City State Zip				Street Address			
Street Address Street Address City State Zip City State Zip			Zip 02138	City	State	Zip	
City State Zip City State Zip	Manager Name			Manager Name			
City State Zip Oily	Street Address			Street Address			
8. RESIDENT AGENT IN RHODE ISLAND	City	State	Zip	City	State	Zip	
	8. RESIDENT AGENT IN	RHODE ISLAND		- 2.00CA		COMMENT OF THE PARTY OF THE PAR	
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.	This information is curre	ently of record in the	Office of the Secret	tary of State. Changes require	filing Form 642.		

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File Date BY \\ \Q\Q\Q\\	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.
Bv:	Signature of Authorized Person Date
	Charles A. Coolridge III
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012