

1. Entity ID No.

72761

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

Swan Realty LLC

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.

2. Exact name of the limited liability company

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

| . Principal office addre | SS | | City | State | 17in |
|---------------------------------------|----------------------------------|--------------------|--|---------------------------------------|--|
| 612 Elmgrove Ave | | | Providence | RI | Zip 02906 |
| NAMENO ATORESO Contact Name | | | MULEUR ITE STORY OF | PERSON: | |
| Michael B. Shore | | | Contact Title Member | | |
| Street Address 612 Elmgrove Ave | | | City Providence | State RI | Zip 02906 |
| LIST ALL MANAGES ("X" BOX FOR ATTA | rs (names and ade Chment) [[] | PRESSES) OF THE | LIMITED LIABILITY COMPANY, I | APPLICABLE - <u>Do</u> | NOT: LET MENUE |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| Dity | State | Zlp | City | State | Zip |
| . RESIDENT AGENT (| N RHODE IBLAND | | | | 23 |
| | republic of recent in the | Office of the Secr | etary of State. Changes require t | illing Form 642. | 8 |
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| FI I 0CT 0 | LED 8 2015 | | Under penalty of perj this report, includ ្រស់ | any accompanying a | irm that I have examine schedules and statem |
| FILE Date | LED 8 2015 | | Under penalty of perj | any accompanying a | irm that I have examine schedules and statem |
| FII OCT 0 BY <u>(4, 2, 4</u> | LED 8 2015 | | Under penalty of perj this report, includ ្រស់ | any accompanying a contained herein a | irm that I have examinate true and correct. |