



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

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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.

1. Entity ID No. <u>000113122</u>		2. Exact name of the limited liability company <u>Ployrde Family Hotel Group, LLC</u>			
3. State of Formation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Hotel Management</u>			
5. Principal office address <u>23 TANGLEWOOD DRIVE</u>		City <u>EAST PROVIDENCE</u>		State <u>RI</u>	Zip <u>02915</u>
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name <u>PAUL PLOURDE</u>			Contact Title <u>MANAGER</u>		
Street Address <u>23 TANGLEWOOD DRIVE</u>			City <u>EAST PROVIDENCE</u>		State <u>RI</u> Zip <u>02915</u>
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name <u>PAUL PLOURDE</u>			Manager Name		
Street Address <u>23 TANGLEWOOD DR</u>			Street Address		
City <u>EAST PROVIDENCE</u>	State <u>RI</u>	Zip <u>02915</u>	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					

This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.

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File Date _____
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By: _____

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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.

Paul Plourde

Signature of Authorized Person

10-8-15
Date

PAUL PLOURDE
Print or Type Name of Authorized Person