

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. 504791	Exact name of the limited liability company Oak Realty LLC				
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island Real Estate				
5. Principal office address PO Box 277			City Narragansett	State RI	Zip 02882
6. MAILING ADDRESS OF Contact Name Abigail Blum	HUMITED LIABILI	Y COMPANY AND	NAME OR TITLE OF CONTACT PI Contact Title Managing Member	ERSON:	
Street Address PO Box 277			City Narragansett	State RI	Zip 02882
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADI	RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - <u>DO</u>	NOT LIST MEMBERS
Manager Name			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					
This information is curre	ntly of record in th	e Office of the Sec	retary of State. Changes require fi	ling Form 642.	H 1 = \$1000

FILED

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File Date	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.		
Check No	10.15.1S		
Ву:	Signature of Authorized Person Date		
FOR SECRETARY OF STATE USE ONLY	Abigail Blum		
TWITTEN THE VIEW OF WILL	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012