



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. 884910		2. Exact name of the limited liability company Anna M. Realty, LLC.	
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To hold and acquire real estate.	
5. Principal office address 4 Water Valley Road		City Hope	State RI
		Zip 02831	
6. MANAGER INFORMATION OF LIMITED LIABILITY COMPANY FOR WHICH THIS REPORT IS FILED:			
Contact Name Steven A. Moretti, Esq.		Contact Title Registered Agent	
Street Address 1140 Reservoir Avenue		City Cranston	State RI
		Zip 02920	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐			
Manager Name Anna M. Martins		Manager Name	
Street Address 4 Water Valley Road		Street Address	
City Hope	State RI	City	State
Zip 02831		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		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.			

FILED

OCT 26 2015

BY

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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.

Anna Martins
Signature of Authorized Person

9-24-15
Date

Anna M. Martins

Print or Type Name of Authorized Person