



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. 125469		2. Exact name of the limited liability company LENA ST., LLC			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island Buying, selling and managing real estate			
5. Principal office address P.O. Box 28		City Bristol		State RI	Zip 02809
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Karen Marsh			Contact Title Manager		
Street Address 327 Poppasquash Road			City Bristol		State RI Zip 02809
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name Karen Marsh			Manager Name Warren G. Marsh		
Street Address 327 Poppasquash Road			Street Address 327 Poppasquash Road		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Manager Name None			Manager Name None		
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.					

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED
OCT 27 2015
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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.

Signature of Authorized Person

Date

Karen Marsh, Member

Print or Type Name of Authorized Person