

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

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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. 790481		2. Exact name of the limited liability company SCT PROPERTY, LLC							
3. State of Formation	4. Brief desc Real esta	Brief description of the character of business conducted in Rhode Island Real estate investment							
5. Principal office address 248 Chestnut Hill Road			City Wakefield	State RI	Zip 02879				
6. MAILING ADDRESS OF Contact Name Michael Hanna	LIMITED LIABILIT	TY COMPANY AND N	AME OR TITLE OF CONTACT PERSON: Contact Title Manager						
Street Address 248 Chestnut Hill Road			City Wakefield	State RI	Zip 02879				
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD	PRESSES) OF THE LI	MITED LIABILITY COMPANY, I	F APPLICABLE - <u>DO</u>	NOT LIST MEMBERS				
Manager Name Michael Hanna			Manager Name None						
Street Address 248 Chestnut Hill Ro	oad		Street Address						
City Wakefield	State RI	Zip 02879	City	State	Zip				
Manager Name None			Manager Name None						
Street Address			Street Address						
City	State	Zip	City	State	Zip				
8. RESIDENT AGENT IN R	7-1-1								
This information is curren	tly of record in the	e Office of the Secret	ary of State. Changes require	filing Form 642.					

FOR SECRETARY OF STATE LISE ONLY		Michael Hanna, Member		
Ву:	-	and the second s	Signature of Authorized Person	Date
Check No	-DYL_	4196	and that all statements contained herein are tr	ue and correct.
File Date		OCT 27 2015	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements,	

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012