

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. 128420	Exact name of the limited liability company SA Builders, LLC				
3. State of Formation Rhode Island		cription of the charaction and Land	cter of business conducted in Rhode Development	Island	
5. Principal office address 15 Robertson Road			City Narragansett	State RI	Zip 02882
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT PE	RSON:	
Contact Name Alexander J. Petrucci			Contact Title Member		
Street Address 15 Robertson Rd			City Narragansett	State RI	Zip 02882
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD	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 R	HODE ISLAND				
This information is curren	tly of record in th	e Office of the Sec	retary of State. Changes require fi	ling Form 642.	ALLEGE BERTHER STATE OF THE PROPERTY OF THE STATE OF THE

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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	10.5.15
	Signature of Authorized Person Date
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012