

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.		2. Exact name of the limited liability company D.V.B.K. Realty, LLC				
123843						
3. State of Formation	1	Brief description of the character of business conducted in Rhode Island				
Rhode Island	Real Esta	ite				
5. Principal office address 1528 East Seattle Slew Circle			City Inverness	State FL	Zip 34453	
. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND NA	ME OR TITLE OF CONTACT	PERSON:		
Contact Name Donald E. Lapierre			Contact Title Manager			
Street Address 1528 East Seattle Slew Circle			City Inverness	State FL	Zip 34453	
LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH		RESSES) OF THE LIM	MITED LIABILITY COMPANY,	F APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name Donald E. Lapierre			Manager Name			
Street Address 1528 East Seattle Slew Circle			Street Address			
City Inverness	State FL	Zip 34453	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN F	HODE ISLAND					
		Office of the Secreta	ary of State. Changes require	filing Form 642.		
		FILED NOV 1 0 2015				
	BY_	5529				
File Date			Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statement and that all statements contained herein are true and correct.			
Check No			Daniel &	Cyrus		
Ву:			Signature of Authoriz Donald E. Lapie	1	Date	
FOR SECRETARY OF STATE USE ONLY			Print or Type Name of Authorized Person			

Form No. 632 Revised: 01/2012