

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.

950734		ne of the limited liabi PROPERTIES,			
3. State of Formation		1	ter of business conducted in Rhode Is	land	
Rhode Island	To buy, s	ell, maintain ar	nd invest in real estate		
5. Principal office address 1050 Main Street, Unit 25			City East Greenwich	State RI	Zip 02818
MAILING ADDRESS O	FLIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT PER	SON:	
ontact Name Karen Whittaker			Contact Title Member		
Street Address 429 Cedar Street			City East Greenwich	State RI	Zip 02818
LIST <u>all</u> Manager: ("X" box for attac		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF A	PPLICABLE - <u>DO</u>	NOT LIST MEMBERS
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
lanager Name		<u></u>	Manager Name		
Street Address			Street Address		
ity	State	Zip	City	State	Zip
. RESIDENT AGENT IN	RHODE ISLAND				
his information is curre	ently of record in the	Office of the Secr	etary of State. Changes require filir	ng Form 642.	
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		FILE NOV 16			STAR STAR
	מ	NOV 16	2015		STATE OF STATE
Silo Pet	В		2015 6/226 Under penalty of perjury		firm that I have examined schedules and statements,
File Date	В	NOV 16	2015 6/226 Under penalty of perjury	y accompanying	firm that I have examined schedules and statements, are true and correct.
Check No		NOV 16	2015 Under penalty of perjury this report, including an and that all statements	ny accompanying contained herein	firm that I have examined schedules and statements,
TO KNOW THE STATE OF THE STATE		NOV 16	2015 Under penalty of perjury this report, including an	y accompanying contained herein	firm that I have examined schedules and statements, are true and correct.

Form No. 632 Revised: 01/2012