

## 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

2015

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

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.

149870	சுத்து நூரை of the limited liability company				
3. State of Formation	4-Brief description	ription of the charac	ter of business conducted in Phod lanage, sell, convey, lease	e Island , <b>mortgage</b> , pled	ge or otherwise
Rhode Island			eal estate and personal pr		
5. Principal office address 68 Sprague Street			City Providence	State R.I	02908
B. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OF TITLE OF CONTACT F	ERSON:	
Contact Name Robert J. Stearns			Contact Title President		
Street Address 111 Pettis Drive			City Warwick	State R.I	<b>7</b> 02886
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH Manager Name	(NAMESTAND) ADD IMENT)		LIMITED LIABILITY COMPANY, I Manager Name		
Street Address	· · ·		Street Address		
City	State	Zìp	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN F	RHODE ISLAND				

FILED NOV 1 6 2015

BY

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

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 Ferson

<u>۱۱-9-2</u>019 Date

Robert J. Steam

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012