

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. 160663	2. Exact nar Montgon	2. Exact name of the limited liability company Montgomery and Dunham Streets LLC					
3. State of Formation	4. Brief desc Real Esta	4. Brief description of the character of business conducted in Rhode Island Real Estate					
RI							
5. Principal office address 747 Glebe Street			City Taunton	State MA	Zip 02780		
6. MAILING ADDRESS O	F LIMITED LIABILIT	Y COMPANY AND N	AME OR TITLE OF CONTACT	TPERSON:			
Contact Name Daniel L. Choiniere		Contact Title Manager					
Street Address 747 Glebe Street			City Taunton	State MA	Zip 02780		
7. LIST ALL MANAGERS ("X" BOX FOR ATTACK		RESSES) OF THE LI	MITED LIABILITY COMPANY	, IF APPLICABLE - <u>Do</u>	NOT LIST MEMBERS		
Manager Name Daniel L. Choiniere			Manager Name				
Street Address 747 Glebe Street			Street Address				
City Taunton	State MA	Zip 02780	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN	RHODE ISLAND						
This information is curre	ntly of record in th	e Office of the Secre	tary of State. Changes requi	re filing Form 642.			

FILED

File Date	NOV 1 6 20:5 Under penalty of perjury, I declare and affirm to this report, including any accompanying scheme.	dules and statements
Check No	BY Amel that all statements contained berein are tr	1 / -
*Bv:	Signature of Authorized Person	Date
	Daniel L. Choiniere	
FOR SECRETARY OF STATE USE OF	VLY	

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012