

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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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. 74990	2. Exact name of the limited liability company Bridge Street Realty, LLC 4. Brief description of the character of business conducted in Rhode Island Manage real estate.				
3. State of Formation Rhode Island					
5. Principal office address 117 Wickenden Street			City Providence	State RI	Zip 02903
Contact Name Mary Ann Basile	·		Contact Title Member		
Street Address 117 Wickenden Street	, (<u>.</u>	City Providence	State RI	Zip 02903
Manager Name MARY HW BASELE			Manager Name		
Street Address 117 WICKENDEN ST			Street Address		
City PRUVINENCE	State R _I	Zip 02463	City	State	Zip
Manager Name		w	Manager Name		
Street Address			Street Address		
Dity	State	Zip	City	State	Zíp
This information is currently (of record in the	Office of the Secretary	y of State. Changes require f	iling Form 642.	<u> </u>
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Form No. 632 Revised: 01/2012 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.

May Aug Soul; Signature of Authorized Person

11/4/15

Date

Mary Ann Basile

Print or Type Name of Authorized Person