STATE OF RHODE ISLAND AND PROVIDENC AN TATIONS
Office of the Secretary of State - Division of es Services
148 W. River Street, Providence, Rhode Island 0290-
Phone: (401) 222-3040 ~ **Email:** corporations@sos. ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

Filing Period: September 1 - November 1 · **This report must b** printed **legibly.**
Filing Fee: $50.00 · **FAILURE TO FILE THIS REPORT BY DEC** WILL RESULT IN A **$25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the limited liability com
000141407	WATER STREET WARREN, LLC
3. State of Formation	4. Brief description of the character of bus ed in Rhode Island
RHODE ISLAND	REAL ESTATE DEVELOPMENT AGEMENT

5. Principal office address		State	Zip
32 WOOD STREET	WARREN	RI	02885

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OF CONTACT PERSON:

Contact Name	
ALBERT BILODEAU	MANAGING PARTNER

Street Address		State	Zip
32 WOOD STREET	WARREN	RI	02885

7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
("X" BOX FOR ATTACHMENT) ☐

Manager Name					
~~ALBERT BILODEAU~~					
Street Address					
~~SEE ABOVE~~					
City	State	Zip		State	Zip
Manager Name					
Street Address					
City	State	Zip		State	Zip

8. RESIDENT AGENT IN RHODE ISLAND
This information is currently of record in the Office of the Secretary require filing Form 642.

2015 DEC -1 AM 10:40
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SECRETARY OF STATE
CORPORATIONS DIV.

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BY M2622249
10:42

File Date _____
Check No _____
By: _____
FOR SECRETARY OF STATE USE ONLY

...erjury, I declare and affirm that I have examined ...ing any accompanying schedules and statements, ...ents contained herein are true and correct.

...ized Person — Date

ALBERT BILODEAU
...of Authorized Person

...orm ... 2
Revised ...20...2