



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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SECRETARY OF STATE  
CORPORATIONS DIV  
2016 APR 13 PM 4:32

Limited Liability Company Annual Report for the year: 2015

Filing period: September 1 - November 1

Filing Fee: \$50.00 \*FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number <u>972420</u>		2. Exact name of the Limited Liability Company <u>THE HOUSE DEPOT, LLC</u>			
3. State of Formation <u>R.I.</u>		4. Brief description of the character of business conducted in Rhode Island <u>REAL ESTATE</u>			
5. Principal Office Address <u>50 RIVER ROAD</u>		City <u>PROVIDENCE</u>		State <u>RI</u>	Zip <u>02860</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>RICHARD A. PACIA</u>			Contact Title <u>MGR</u>		
Street Address <u>50 RIVER ROAD</u>		City <u>PROV</u>		State <u>RI</u>	Zip <u>02860</u>
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
8. Resident Agent in Rhode Island This information is currently of record in the Department of State. Changes require filing Form 642.					
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.					
Name of Authorized Person <u>RICHARD A. PACIA</u>				Date <u>4/13/16</u>	
Signature of Authorized Person <u>[Signature]</u>				SIGN DOCUMENT HERE	

FILED

APR 13 2016

By 272281  
A.A.