

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

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

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Limited Liability Company Annual Report for the year: 2009
Filing period: September 1 - November 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY DECEMBER 1 W	ILL RESULT IN A \$25.00 PENALTY F	Ĩ

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1. Entity ID Number	2. Exact name		9 DA				
113985	SullivanHaye	·W /M					
3. State of Formation	4. Brief descrip	4. Brief description of the character of business conducted in Rhode Island					
Connecticut	Commercial Real Estate						
5. Principal Office Address			City	State	Z ip		
10 Waterside Drive Suite 301			Farmington	СТ	06032		
6. Mailing Address of Limited Lia		and Name or Title					
Contact Name John E. Hayes II			Contact Title Managing Member				
Street Address 10 Waterside Drive Suite 301			^{City} Farmington	State CT	^{Zip} 06032		
7. List ALL managers (names an		the Limited Liab	ility Company, IF APPLICAE	BLE - DO NOT LIST I	MEMBERS		
Manager Name John E. Hayes II			Manager Name		SI S S		
Street Address 10 Waterside Drive Suite 301			Street Address		444 .		
City Farmington	State CT	^{Zip} 06032	City	State	TAR ORA ORA		
Manager Name			Manager Name				
Street Address			Street Address		7 :6 A10 IVIS		
City	State	Zip	City	State	Zip		
		•	Che	ck the box to indicate	an attachment		
8. Resident Agent in Rhode Islan	d This information	is currently of rec	ord in the Department of State.	Changes require filing F	orm 642.		
Under penalty of perjury, I deci statements, and that all statem				g any accompanying	schedules and		
Name of Authorized Person							
John E. Hayes II	04/06/201	16					
Signature of Authorized Person		sGND	MATHERE	•			

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Form No. 632 Revised: 2016