

## 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

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

## 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.	2. Exact na	me of the limited liat	pility company			
941920	Centerdale Motor Sales, LLC					
3. State of Formation	4. Brief des	cription of the chara	cter of business conducted in Rhode	Island		
Rhode Island	aut	to sales				
5. Principal office address			City	State	Zip	
35 Putnam Avenue			Johnston	RI	02919	
	TED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT PE	RSON:	550	
Contact Name Ralph Ottaviano			Contact Title Member			
Street Address 35 Putnam Ave.			City Johnston	State RI	Zip 02921	
7. LIST ALL MANAGERS (NAM ("X" BOX FOR ATTACHMEN"	IES AND ADI	PRESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - <u>DO N</u>	OT 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	
8. RESIDENT AGENT IN RHODI	E ISLAND					
This information is currently of	record in th	e Office of the Seci	retary of State. Changes require fil	ing Form 642.	the state of the s	

## FILED

APR 2 7 2016

File Date	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statemen	l ts,
Check No	and that all statements gontained herein are true and correct.	
Ву:	Signature of Authorized Person Date	-
FOR SECRETARY OF STATE USE ONLY	Ralph Ottaviano	
	Print or Type Name of Authorized Person	

Form No. 632 Revised: 01/2012