



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

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RECEIVED  
 SECRETARY OF STATE  
 CORPORATIONS DIV.  
 2016 MAY - 5 PM 2:00

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

1. Entity ID Number		2. Exact name of the Limited Liability Company	
790768		32 HANOVER ST LLC	
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island	
RHODE ISLAND		REAL ESTATE	
5. Principal Office Address		City	State
16 TIMBERLAND DR.		LINCOLN	RI
		Zip	02865
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name		Contact Title	
JENNIFER CALDWELL		OWNER	
Street Address		City	State
16 TIMBERLAND DR.		LINCOLN	RI
		Zip	02865
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
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
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		Date	
WARREN CALDWELL		05-05-2016	
Signature of Authorized Person		SIGN DOCUMENT HERE	

FILED

MAY 05 2016

BY LL 273670

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