



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

Annual Report for the year: 2016
Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 128921		2. Exact name of the Limited Liability Company Swanlea, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Real Estate Holding Company			
5. Principal Office Address 36 Washington Square		City Newport		State RI	Zip 02840
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Letizia Ray		Contact Title			
Street Address 359 Victoria Avenue Apt. 1		City Westmount, Quebec		State Canada	Zip H3Z2N1
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 LETIZIA RAY				Date Sept 29, 2016	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

FILED

SEP 06 2016

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MAIL TO:
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Website: www.sos.ri.gov