



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. ID No. 000799064

2. Exact Name of the Limited Liability Company CRANSTON ADDISON LLC

3. State of Formation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 531110

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

OWNER OF RESIDENTIAL APARTMENT RENTALS

5. Principal Office Address

No. and Street: 380 UNION ST. STE. 300
City or Town: WEST SPRINGFIELD State: MA Zip: 01089 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:
No. and Street: 380 UNION STREET, SUITE 300
City or Town: WEST SPRINGFIELD State: MA Zip: 01089 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	NEPSA MANAGER LLC	380 UNION STREET, SUITE 300 WEST SPRINGFIELD, MA 01089 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 7 Day of September, 2016 at 11:31:09 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By NEPSA MANAGER LLC
Signature of Authorized Person

Form No. 632
Revised 09/07

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