

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.

SECRETARY OF CLASS	
2018 950 12 PT 3: 40	

1. Entity ID Number	2. Exact r	2. Exact name of the Limited Liability Company				
127714		THOMSONS PROPERTIES, LLC				
3. NAICS Code		Brief description of the character of business conducted in Rhode Island REAL ESTATE				
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
14 ABBOTTS CROSSING ROAD		COVENTRY	RI	02816		
7. Mailing Address of Limited		any and Name o				
Contact Name THOMAS MARCOTTE		Contact Title MEMBER	Contact Title MEMBER			
Street Address 14 ABBOTTS CROSSING ROAD		City COVENTRY	State RI	^{Zip} 02816		
8. List ALL managers (names	and addresse	es) of the Limited	l Liability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS	
Manager Name		Manager Name				
Street Address		Street Address	Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		l		Check the box to i	ndicate an attachment	
			of record with the Department of Stat			
Under penalty of perjury, I d statements, and that all state	eclare and aff ements conta	firm that I have ined herein are	examined this report, including true and correct.	g any accompanyin	g schedules and	
Name of Authorized Person THOMAS MARCOTTE			/	Date 9-4	9-16	
Signature of Authorized Person NONE DOCUMENT HERE						
		l				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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