RI SOS Filing Number: 201608948750 Date: 09/16/2016 4:00 PM

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 **93060**	2. Exact name of the Limited Liability Company **Jobel Shopperstown Associates, LLC**		
3. NAICS Code 53 - Real Estate and Rental and	4. Brief description of the character of business conducted in Rhode Island **Ownership and management of real estate**		
5. State of Formation **Massachusetts**			
6. Principal Office Address **P.O. Box 4207**	City **Dedham**	State **MA**	Zip **02027**
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name **Harris Krafchick**	Contact Title **Manager**		
Street Address **P.O. Box 4207**	City **Dedham**	State **MA**	Zip **02027**
8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**			
Manager Name **Harris Krafchick**	Manager Name **Sheryl Dropkin**		
Street Address **P.O. Box 4207**	Street Address **P.O. Box 4207**		
City **Dedham** / State **MA** / Zip **02027**	City **Dedham** / State **MA** / Zip **02027**		
Manager Name	Manager Name		
Street Address	Street Address		
City / State / Zip	City / State / Zip		
			Check the box to indicate an attachment ☐
9. Resident Agent in Rhode Island. This information is currently of record with 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 **Harris Krafchick**		Date **September , 2016**	
Signature of Authorized Person SIGN DOCUMENT HERE			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
SEP 16 2016
By

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FORM 632 - Revised: 08/2016