



State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

**STAMP**  
 FOR  
 SECRETARY OF STATE  
 USE ONLY

**Limited Liability Company Annual Report for the year: 2016**

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 FEE.

1. Entity ID Number <b>485179</b>		2. Exact name of the Limited Liability Company <b>West Shore, LLC</b>			
3. State of Formation <b>RHODE ISLAND</b>		4. Brief description of the character of business conducted in Rhode Island <b>Real Estate</b>			
5. Principal Office Address <b>20 Rabbit Run</b>		City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Jeffrey D. Salk</b>		Contact Title <b>President</b>			
Street Address <b>20 Rabbit Run</b>		City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>None</b>		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
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 <b>Jeffrey D. Salk</b>				Date <b>9/12/16</b>	
Signature of Authorized Person 		SIGN DOCUMENT			

**STAMP**  
 FOR  
 SECRETARY OF STATE  
 USE ONLY

**FILED**

SEP 19 2016

By 25937