



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 <b>103182</b>		2. Exact name of the Limited Liability Company <b>Morrissey Management LLC</b>			
3. NAICS Code <b>53 - Real Estate and Rental and</b>		4. Brief description of the character of business conducted in Rhode Island <del>any legal purpose</del> <b>to manage real estate</b>			
5. State of Formation <b>RI</b>					
6. Principal Office Address <b>1150 Reservoir Avenue</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02920</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Kenneth J. Morrissey</b>			Contact Title <b>Registered Agent</b>		
Street Address <b>1150 Reservoir Avenue</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02920</b>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>Kenneth J. Morrissey</b>			Manager Name <b>Myrto Morrissey</b>		
Street Address <b>1150 Reservoir Avenue</b>			Street Address <b>1150 Reservoir Avenue</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person <b>Kenneth J. Morrissey</b>				Date <b>9/9/16</b>	
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 19 2016

By 283858  
**A.A.**