

2016

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Annual Report for the year: Limited Liability Company

→ Filing period: September 1 - November 1

→ Filling Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact r	2. Exact name of the Limited Liability Company				
503437		Wolf Rock AHC R.E. Holding, LLC				
3. NAICS Code	4. Brief de Real Esta	4. Brief description of the character of business conducted in Rhode Island Real Estate Holding Company				
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
710 South County Trail			Exeter	RI	02822	
7. Mailing Address of Limited	d Liability Comp	any and Name o	r Title of Contact Person	<u> </u>		
Contact Name Elizabeth Has	singer		Contact Title			
Street Address 710 South Co	unty Trail		City Exeter	State RI	^{Zip} 02822	
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLI	CABLE - DO NOT LIST M	EMBERS	
Manager Name			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	
				Check the box to inc	licate an attachment	
9. Resident Agent in Rhode I	sland. This Inform	nation is currently o	of record with the Department of	State. Changes require filing	Form 642.	
Under penalty of perjury, I (statements, and that all sta	declare and aff tements conta	firm that I have (ined herein are	examined this report, include true and correct.	ding any accompanying	schedules and	
Name of Authorized Person				Date		
Elizabeth Hasinger				9-1	2-10	
Signature of Authorized Person	on	SIGN I	DOCUMENT HERE			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

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