



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 145834	2. Exact name of the Limited Liability Company THE MORROW FAMILY LLC		
3. NAICS Code 53	4. Brief description of the character of business conducted in Rhode Island To acquire, own, develop, lease, sell and/or manage real estate		
5. State of Formation Rhode Island			
6. Principal Office Address 129 Baker Street	City Providence	State RI	Zip 02905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Robert Morrow		Contact Title	
Street Address 194 Poppasquash Road		City Bristol	State RI Zip 02809
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
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 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.			
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 Robert Morrow		Date 9/18/16	
Signature of Authorized Person <i>Robert Morrow, Director</i>		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 21 2016
 By *1051*