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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2010 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	2 Every agent of the Line Week Line					
	2. Exact name of the Limited Liability Company					
515 180	SPREMULI & Rennewy Realty NC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
50	Real estate					
5. State of Formation	KARE COMME					
27						
6. Principal Office Address			City	State	Zip	
2475 Pourvolut Ave			Elest Paridence	IS	02914	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Michael T Lennery			Contact Title TREVESUKE K			
Street Address 2475 FRONTICIUT DUC			City Providence	State 2-1	Zip 02914	
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	Žip	City	State	Zip	
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				Date		
MICHAEL J Kenneby				9/18/2010		
Signature of Authorized Person SIGN DOCUMENT HERE						
Wichel V Minney						

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 &

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