State of Rhode Island and Providence Plantations Department of State - Business Services Division
2016

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.

La Sura ID Number							
1. Entity ID Number	2. Exact name of the Limited Liability Company						
108214 Minturn-Metacom LLC							
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53 - Real Estate and Rental and Real Estate Development							
5. State of Formation							
RI							
6. Principal Office Address			City	State	Zip		
370 Metacom Avenue			Bristol	RI	02809		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Lisa Fonseca			Contact Title Manager				
Street Address 370 Metacom Ave	nue		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 Lisa S. Fonse േ വ			Manager Name				
Street Address 137 Ferry Road			Street Address				
^{City} Bristol	State RI	^{Zip} 02809	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						
Lisa S. Fonseca	9/21/16						
Signature of Authorized Person JUDICUSION 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 23 2016 2090 05