



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016

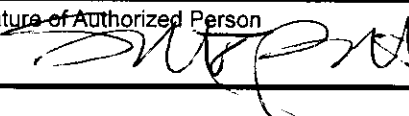
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

RECEIVED
RI, DEPT. OF STATE
BUS. SVCS. DIV.
2016 SEP 27 PM 3:11

1. Entity ID Number 152943		2. Exact name of the Limited Liability Company CORNERSTONE INN, LLC			
3. NAICS Code 72 - Accommodation and Food		4. Brief description of the character of business conducted in Rhode Island TO OPERATE AN INN			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 236 POST ROAD		City WESTERLY		State RI	Zip 02891
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name SHEILIA T. BEATTIE			Contact Title		
Street Address 236 POST ROAD		City WESTERLY		State RI	Zip 02891
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name STANTON J. TERRANOVA, SR.			Manager Name		
Street Address P.O. BOX 1965			Street Address		
City WESTERLY	State RI	Zip 02891	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 SHEILIA T. BEATTIE				Date 9/22/16	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

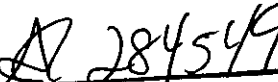
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

FILED

SEP 27 2016

By  284549