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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	la room					
275695	Exact name of the Limited Liability Company WILLIAM STREET PROPERTIES, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
72	HOSPITALITY					
5. State of Formation	TIOSETTALIT					
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
8 FREEBODY STREET			NEWPORT	RI	02840	
7. Mailing Address of Limited Lia	bility Compan	y and Name or Title	of Contact Person			
Contact Name JAMES F. HYMAN			Contact Title REGISTERED AGENT			
Street Address 8 FREEBODY STREET			city NEWPORT	State RI	^{Zip} 02840	
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						
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 RICHALD C. SARDLIA Signature of Authorized Person 1						
Signature of Authorized Person						

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 29 2016