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	2. Exact name of the Limited Liability Company						
138563	132 Lambert Lind Highway, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53 - Real Estate and Rental and	A Real Estate Holding Company						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
951 North Main Street			Providence	RI	02904		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Daniel J. Ryan			Contact Title CPA				
Street Address 951 North Main Street			City Providence	State RI	^{Zip} 02904		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Mark A. Ross			Manager Name Darrell S. Ross				
Street Address 173 Shadow Brook Drive		Street Address 300 Polmer Park					
City Warwick	State Ri	^{Zip} 02886	City Palm Beach	State FL	^{Zip} 33480		
^{Manager Name} Daniel J. Ryan			Manager Name				
Street Address 951 North Main Street			Street Address				
^{City} Providence	State RI	^{Zip} 02904	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 deci statements, and that all statem				any accompanyin	g schedules and		
Name of Authorized Person A RELET CALL			Date 9/2 7/16				
Signature of Authorized Person Aviver Burner Morroger							

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 O

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