(B)	State of Rhode Island and Providence Plantations  Department of State - Business Services Division					
	Department of State - Busines	ss 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.

Entity ID Number     2. Exact name of the Limited Liability Company						
146415	Castlebaci	astleback Realty, LLC				
3. NAICS Code 53 - Real Estate and Rental and	Brief description of the character of business conducted in Rhode Island     own and manage rental property					
5. State of Formation Rhode Island						
6. Principal Office Address			City	State	Zip	
3 Ledge Road			Newport	RI	02840	
7. Mailing Address of Limited Lia	bility Compar	ny and Name or	Title of Contact Person			
Contact Name Rosanne Voute	· · · ·		Contact Title	Contact Title		
Street Address 3 Ledge Road			City Newport	State RI	Zip 02840	
8. List ALL managers (names ar	d addresses	of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST N	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address	· ···		Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address	<u> </u>	·	Street Address			
City	State	Zip	City	State	Zip	
			<u> </u>	Check the box to in	ndicate an attachment	
9. Resident Agent in Rhode Island	d. This informa	ition is currently o	f record with the Department of S	tate. Changes require filing	Form 642.	
Under penalty of perjury, I deci statements, and that all statem	are and affir	m that I have e	xamined this report, includi	ng any accompanying	schedules and	
Name of Authorized Person				Date		
Rosanne Voute		<u> </u>		Octobe	2,2016	
Signature of Authorized Person  Posoure Court	É	SIGN E	OCUMENT 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 BY\_\_