Anti-Maga
1,745

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					
960553	Gilbane Street Properties, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
81 - Other Services (except Pub	Provide management services					
5. State of Formation						
Rhode Island	ļ					
6. Principal Office Address			City	State	Zip	
120 Centerville Road			Warwick	RI	02886	
7. Mailing Address of Limited Lia	bility Compar	ny and Name or Title				
Contact Name Norman A. Kornwitz, M.D.			Contact Title Manager			
Street Address 120 Centerville Road			City Warwick	State RI	^{Zip} 02886	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name 7.			Manager Name			
Street Addre			Street Address			
City	Cr-,		City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
······································	L	I		Check the box to in	ndicate an attachment	
9. Resident Agent in Rhode Islar	nd. This inform	ation is currently of rec	ord with the Department of	State. Changes require filin	g Form 642.	
Under penalty of perjury, I dec statements, and that all staten	lare and affi nents contail	rm that I have exan	nined this report, include and correct.	ling any accompanyin	g schedules and ,	
Name of Authorized Person	_			Date	1/1	
Norman A. Kornyvitz, M.G.						
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 OCT 11 2010 BY_38178 DS