



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

STAMP

10-5-16

**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 <b>790042</b>		2. Exact name of the Limited Liability Company <b>ARK Properties, LLC</b>			
3. NAICS Code 53 - Real Estate and Rental and		4. Brief description of the character of business conducted in Rhode Island <b>To hold and manage Real Estate</b>			
5. State of Formation <b>Rhode Island</b>					
6. Principal Office Address <b>1988 Louisquisset Pike</b>		City <b>Manager</b>	State <b>RI</b>	Zip <b>02865</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Michael F. Elliott</b>			Contact Title <b>Manager</b>		
Street Address <b>1988 Louisquisset Pike</b>			City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
8. List <b>ALL</b> managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - <b>DO NOT LIST MEMBERS</b>					
Manager Name <b>Michael F. Elliott</b>			Manager Name <b>John Trojan, Jr.</b>		
Street Address <b>1988 Louisquisset Pike</b>			Street Address <b>1988 Louisquisset Pike</b>		
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person <b>Michael F. Elliott</b>				Date <b>10-5-16</b>	
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 14 2016**

BY 2014