



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 937040		2. Exact name of the Limited Liability Company D & S COTTA LLC			
3. NAICS Code 53		4. Brief description of the character of business conducted in Rhode Island ACQUIRING, DEVELOPING, LEASING, DEALING IN AND HOLDING PROPERTY FOR INVESTMENT			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 895 MIDDLE ROAD		City PORTSMOUTH	State RI	Zip 02871	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name SANDRA A. COTTA			Contact Title MANAGER		
Street Address 895 MIDDLE ROAD		City PORTSMOUTH	State RI	Zip 02871	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name SANDRA A. COTTA			Manager Name DAVID M. COTTA		
Street Address 895 MIDDLE ROAD			Street Address 895 MIDDLE ROAD		
City PORTSMOUTH	State RI	Zip 02871	City PORTSMOUTH	State RI	Zip 02871
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.					
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 SANDRA A. COTTA				Date 10/5/16	
Signature of Authorized Person <i>Sandra A. Cotta</i>				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

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