

# State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

## Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL	REPORT	YEAR:	2016

- 1. **ID No.** 000506427
- 2. Exact Name of the Limited Liability Company JMG Properties, LLC
- 3. State of Formation

State: RI

#### **ARTICLE III**

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 53

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

### REAL ESTATE HOLDINGS

5. Principal Office Address

No. and Street: 19 CAPRI DRIVE

City or Town: <u>JOHNSTON</u> State: <u>RI</u> Zip: <u>02919</u> Country: <u>USA</u>

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: WILLIAM M. GERIBO Contact Title:

No. and Street: 19 CAPRI DRIVE

City or Town: JOHNSTON State: RI Zip: 02919 Country: USA

### 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
MANAGER	WILLIAM M GERIBO	19 CAPRI DRIVE JOHNSTON, RI 02919 USA	
MANAGER	CATHERINE M. GERIBO	19 CAPRI DRIVE	

JOHNSTON, RI 02919 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

WILLIAM GERIBO 19 CAPRI DRIVE JOHNSTON, RI 02919

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 19 Day of October, 2016 at 2:38:26 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By WILLIAM M. GERIBO

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations All Rights Reserved