

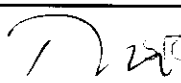


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 951354		2. Exact name of the Limited Liability Company SPRING CREEK, LLC									
3. NAICS Code 81 - Other Services (except Pub		4. Brief description of the character of business conducted in Rhode Island									
5. State of Formation RI											
6. Principal Office Address 122 TOURO STREET				City NEWPORT		State RI		Zip 02840			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person											
Contact Name TURNER C. SCOTT					Contact Title						
Street Address 122 TOURO STREET					City NEWPORT		State RI		Zip 02840		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS											
Manager Name Turner C Scott					Manager Name						
Street Address 122 TOURO ST					Street Address						
City Newport		State RI		Zip 02840		City		State		Zip	
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								Date 10/4/16			
Signature of Authorized Person 								DO NOT 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 19 2016

BY 34751