



State of Rhode Island and Providence Plantations

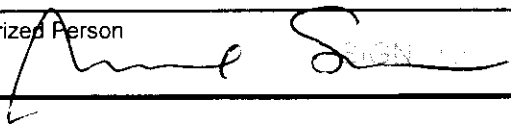
Department of State - Business Services Division

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.

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1. Entity ID Number 156583		2. Exact name of the Limited Liability Company Classic Restorations Leasing, LLC			
3. NAICS Code 81 - Other Services (except Pub		4. Brief description of the character of business conducted in Rhode Island LEASING OF ALL TYPES			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 365 CHARLES STREET		City PROVIDENCE		State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name RICHARD V. SHAPPY			Contact Title PRESIDENT		
Street Address 365 CHARLES STREET			City PROVIDENCE		State RI Zip 02904
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☐					
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 RICHARD V. SHAPPY					Date 10/16
Signature of Authorized Person 					

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 20 2016

By 