(FOPE	State of Rhode Island and Providence Plantations Department of State - Business Services Division
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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	2 Evact nam	e of the Limited Li	ability Company				
128679	Exact name of the Limited Liability Company GOWEN INVESTMENT PROPERTIES, LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
53 - Real Estate and Rental and	real estate h						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
41 1/2 Canal Street			Westerly	RI	02891		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Stephen Gowen			Contact Title				
Street Address 41 1/2 Canal Street			City Westerly	State RI	^{Zip} 02891		
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 inc	licate 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	Date						
STEPHEN GO	10-14	10-14-16					
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 2 0 2016

FORM 632 - Revised: 08/2016