State of Rhode Island and Providence Plantations Department of State - Business Services Divisions	on
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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. Exact name of the Limited Liability Company						
116538	Harbor Group Home, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53 - Real Estate and Rental ar	Own commercial property						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
6 Briarwood Drive			Barrington	RI	02806		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Alan Doyle			Contact Title Member				
Street Address 6 Briarwood Drive			City Barrington	State RI	^{Zip} 02806		
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	Zîp		
				Check the box to in	dicate 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	Date		
Alan Doyle				October	October 18, 2016		
Signature of Authorized Person							
Colon Day 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 1 2016

FORM 632 - Revised: 08/2016