

Annual Report for the year: **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					
989308	521 Property Manager LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental ar	Real Estate development, investment, management and holdings					
5. State of Formation						
Rhode Island	<u></u>					
6. Principal Office Address			City	State	Zip	
521 Roosevelt Ave			Central Falls	RI	02863	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Louis C Yip			Contact Title Member			
Street Address 521 Roosevelt Ave			City Central Falls	State RI	<sup>Zip</sup> <b>02863</b>	
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 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	
Louis C Yip				10/20/2016		
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 21 2016

By Le 286615