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	2. Exact name of the Limited Liability Company					
000555382	Conanicut Island Cottage, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental ▼	To engage in the business of acquiring, owning, holding, leasing, developing and managing real property.					
5. State of Formation	7,0,0,0,0,0,0					
Rhode Island						
6. Principal Office Address			City	State	Zip	
28 Grinnell Street			Jamestown	RI	02816	
7. Mailing Address of Limited Li	ability Compar	ny and Name or Ti				
Contact Name William MacAndrew		Contact Title Manager				
Street Address 10 Viola Street		City Coventry	State RI	<sup>Zip</sup> 02816		
8. List <b>ALL</b> managers (names a	ind addresses	) of the Limited Lia			MEMBERS	
Manager Name William MacAndrew		Manager Name Deirdre Kentley				
Street Address 10 Viola Street		Street Address 14 Oakland Street				
City Coventry	State RI	<sup>Zip</sup> 02816	City Medway	State MA	<sup>Zip</sup> <b>02053</b>	
Manager Name		Manager Name				
Street Address		Street Address				
City	State	Zip	City	State	Zip	
	.1			Check the box to in	ndicate an attachment	
9. Resident Agent in Rhode Isla	nd. This informa	ation is currently of re	ecord with the Department of S	tate. Changes require filin	g Form 642.	
Under penalty of perjury, I dec statements, and that all stater				ing any accompanyin	g schedules and	
Name of Authorized Person				Date	7 .	
Deirdre Kentley			10/21/16			
Signature of Authorized Person	10			· · · · · · · · · · · · · · · · · · ·		

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** 

By 11 2 4 2016