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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.

				<del></del>			
1. Entity ID Number	2. Exact name of the Limited Liability Company						
925991	SMITH PROPERTIES, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53 - Real Estate and Rental and Purchase, sale and manag							
5. State of Formation							
RI							
O. Dinainal Office Address			City	State	Zip		
6. Principal Office Address			North Providence	RI	02911		
6 St. Johns Circle							
7. Mailing Address of Limited Lia	bility Compar	ny and Name or Tit					
Contact Name Thomas Q. Smith			Contact Title Member				
Street Address 6 St. Johns Circle	)		City North Providence	State RI	<sup>Zip</sup> <b>02911</b>		
8. List ALL managers (names ar	nd addresses	) of the Limited Lia	bility Company, IF APPLICABLE	- DO NOT LIST	MEMBERS		
Manager Name		· · · · · · · · · · · · · · · · · · ·	Manager Name				
Street Address		· · · · · · · · · · · · · · · · · · ·	Street Address				
City	State	Zip	City	State	Zip		
Manager Name	l,		Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	<u> </u>			Check the box to	indicate an attachment		
9. Resident Agent in Rhode Islar	nd Thin inform	ation is autrently of r					
Under penalty of perjury, I dec statements, and that all staten	lare and aπι nents contai	rm that I have exa ned herein are tru	e and correct.	iny accompanyii			
Name of Authorized Person					Date		
Thomas Q. Smith					10/7/2016		
Signature of Authorized Person	Des	net	Add to the second				

## 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