

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2016

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.	2. Exact name of the limited liability company				
000140882	Red Church Properties, LLC				
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island				
RI	Real Estate				
5. Principal office address 461 Main Street			City East Greenwich	State RI	Zip 02818
6. MAILING ADDRESS OF L	MITED LIABILE	TY COMPANY AND NA	ME OR TITLE OF CONTACT PER	ISON:	
Contact Name Allen B. Gammons, Jr.			Contact Title President		
Street Address 461 Main Street			City East Greenwich	State RI	Zip 02818
7. LIST <u>ALL</u> MANAGERS (N. ("X" BOX FOR ATTACHMI		DRESSES) OF THE LII	MITED LIABILITY COMPANY, IF A	PPLICABLE - <u>DO</u>	NOT LIST MEMBERS
Manager Name Allen B. Gammons, Jr.			Manager Name		
Street Address 461 Main Street			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHO	DE ISLAND				
			ary of State. Changes require filir		

FILED ov OCT 2 4 2016

BY____

File Date	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.
Check No	
Ву:	Signature of Authorized Person Date
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012