



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. ID No. 000125812

2. Exact Name of the Limited Liability Company Briar Patch, LLC

3. State of Formation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

81

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

REAL ESTATE

5. Principal Office Address

No. and Street: 449 OLD BOSTON NECK ROAD, P.O. BOX
202

City or Town: SAUNDERSTOWN

State: RI Zip: 02874 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: PETER G. RANDALL Contact Title: MANAGER

No. and Street: 20 LAUGHLIN LANE

City or Town: PHILLADELPHIA

State: PA

Zip: 19118

Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	JULIA RANDALL SHARPE	P.O. BOX 202 SAUNDERSTOWN, RI 02874 USA

MANAGER

PETER G RANDALL

20 LAUGHLIN LANE
PHILADELPHIA, PA 19118- USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

PAUL A. SILVER, ESQ. HINCKLEY, ALLEN & SNYDER LLP 50 KENNEDY PLAZA, SUITE 1500
PROVIDENCE , RI 02903

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of October, 2016 at 8:48:52 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By /PAUL A. SILVER, ESQ./
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved