



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 781913		2. Exact name of the Limited Liability Company 2525 West Shore Road, LLC			
3. NAICS Code 53		4. Brief description of the character of business conducted in Rhode Island Real Estate and Rental and Leasing.			
5. State of Formation Rhode Island					
6. Principal Office Address 48 Schooner Cove Lane		City Narragansett	State RI	Zip 02882	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Christine M. Guzeika		Contact Title Member			
Street Address 48 Schooner Cove Lane		City Narragansett	State RI	Zip 02882	
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 indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 842.					
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 Christine M. Guzeika				Date 10-19-16	
Signature of Authorized Person Christine M. Guzeika				SIGN DOCUMENT HERE	

**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 27 2016**  
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