	State of		
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Rhode Island and Providence Plantations

rtment 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 159005	2. Exact name of the Limited Liability Company						
	Nancy Carol Realty, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53							
5. State of Formation	real estate ownership and management						
RI							
6. Principal Office Address			City	State	Zip		
70 What Cheer Road			Narragansett	RI	02882		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name NANCY C. GRELLO			Contact Title				
Street Address 125 South Polk Dr (PO Box 2502, Sarasota, FL 34230)			City Sarasota	State FL	Zip 34236		
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							
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
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			Date	Date			
Nancy C. Grello				10/20/16			
Signature of Authorized Person /							
Many C. Grello 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 3 1 2016

By_

FORM 632 - Revised: 08/2016