State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Department of State - Business Services Division	
Annual Report for the year: こつし	
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 2. Exact name of the Limited Liability Company Great Island investments

4. Brief description of the character of business conducted in Rhode Island

REAL ESTATE Holding Company -1355 3. NAICS Code 5. State of Formation All legal Business 6. Principal Office Address City State Zip 83 POWET RD 02860 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person **Contact Name** Contact Title CATAldo Street Address PAUTUCKET State Zip 0 2860 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS Manager Name Manager Name CATAID 6 ltaruet Street Address POWET Street Address Printucket City Zip 2860 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 CATALOU 10/28/16 HARJEY Signature of Authorized Person 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

NOV 01 2016

FORM 632 - Revised: 08/2016