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2016 NOV -7 PM 3: 49

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.

	T					
Entity ID Number	2. Exact name of the Limited Liability Company					
1382888	113 Carrington Avenue, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental ar	To own real estate.					
5. State of Formation	1					
RI						
6. Principal Office Address	<u> </u>		City	State	Zip	
147 Railroad Street			Manville	RI	02838	
7. Mailing Address of Limited Lia		ny and Name or				
Contact Name Jacques L. Moreau		Contact Title Member				
Street Address 200 Manville Hill RD B33		City Cumberland	State RI	<sup>Zip</sup> 02864		
8. List ALL managers (names ar	id addresses	) of the Limited L	iability Company, IF APPLICAE	BLE - DO NOT LIST I	MEMBERS	
Manager Name	anager 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 in	ndicate an attachment	
9. Resident Agent in Rhode Islan	d, This informa	ation is currently of	record with the Department of State	te. Changes require filin	g Form 642.	
Under penalty of perjury, I deci statements, and that all statem	are and affirents contain	m that I have ex ned herein are t	xamined this report, including rue and correct.	g any accompanying	g schedules and	
Name of Authorized Person			Date	Date		
Jacques L. Moreau			11/1/2016			
Signature of Authorized Person	6.0	SIGN D	OCUMENT HERE			
7 7 7						

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** 

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BY 288040

FORM 632 - Revised: 08/2016