

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2016

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

541522		ne of the limited liab	- · ·			
		4 Johnston, LL				
. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Real Esta	te Developmer	nt any any lawful purpose a	nciliary thereto	ı	
5. Principal office address  1 Realty Way			City East Providence	State <b>RI</b>	Zip <b>02914</b>	
No. of the Control of	MITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT PE	RSON:		
ontact Name Richard C. Tallo			Contact Title			
Street Address 999 Chalkstone Avenue			City <b>Providence</b>	State RI	Zip <b>02908</b>	
LIST <u>ALL</u> MANAGERS (N ("X" BOX FOR ATTACHM	AMES AND ADD ENT) [	RESSES) OF THE	LIMITED LIABILITY COMPANY, IF A	APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
ity	State	Zip	City	State	Zip	
anager Name	<u> </u>	•	Manager Name			
Street Address			Street Address			
ity	State	Zip	City	State	Zip	
RESIDENT AGENT IN RHO				J		
is information is currently	of record in the	Office of the Secr	etary of State. Changes require fili	ng Form 642.		
			FILED NOV 17 20		R.J. DEPT. OF S.TS SYCE	
			BY_CK128		S STATE S BIV PM 3: 32	
File Date				ny accompanying	irm that I have examined schedules and statement are true and correct.	
Check No	·			2	(1/10/	
By:			Signature of Authorized F	Person	'Date '	
			John Pesce			

Form No. 632 Revised: 01/2012