



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 585332		2. Exact name of the Limited Liability Company East Meadow, LLC			
3. NAICS Code 53 <input type="checkbox"/>		4. Brief description of the character of business conducted in Rhode Island HOLD REAL ESTATE			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 2426E Commodore Perry Hwy		City Wakefield	State RI	Zip 02879	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kimberly Hooper		Contact Title Member			
Street Address 2426E Commodore Perry Hwy		City Wakefield	State RI	Zip 02879	
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 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 <i>Kimberly Hooper</i>			Date <i>11/15/16</i>		
Signature of Authorized Person <i>Kimberly Hooper</i>					

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 23 2016
 BY 1090 DS

FORM 632 - Revised: 08/2016