

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company					
134637	QUEST ENTERPRISES, LLC					
3. NAICS Code 53 5. State of Formation	Brief description of the character of business conducted in Rhode Island TO OWN, MANAGE AND MAINTAIN REAL ESTATE PROPERTY AND ALL OTHER LEGAL PURPOSES					
6. Principal Office Address			City	State	Zip	
28 GARFIELD AVENUE			CRANSTON	RI	02920	
7. Mailing Address of Limited Lia	bility Compa	any and Name or	Title of Contact Person			
Contact Name DAVID GILLIGAN			Contact Title ATTORNEY			
Street Address 28 GARFIELD AVENUE			City CRANSTON	State RI	^{Zip} 02920	
8. List ALL managers (names ar	nd addresse	s) of the Limited	Liability Company, IF APPLICAB	BLE - DO NOT LIST I	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 in	ndicate an attachment	
9. Resident Agent in Rhode Islan	d. This inform	nation is currently o	f record with the Department of State	e. Changes require filin	g Form 642.	
Under penalty of perjury, I deci statements, and that all statem	lare and affi ents contai	irm that I have e ined herein are t	examined this report, including true and correct.	any accompanying	g schedules and	
Name of Authorized Person				Date	Date	
DAVID GILLIGAN-MEMBER				1\$/28/2016		
Signature of Authorized Person		huser	OCUMENT 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

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