Department of State -			
Annual Report for the year: Limited Liability Company	2016		
→ Filing period: September 1 - No	vember 1		

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Evert same of the Limited Lightlity Company						
1027289	Exact name of the Limited Liability Company Oak Hill Subdivision Homeowners Association LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
<u>-</u>	to manage a residential living area						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
c/o 3210 Post Road			Warwick	RI	02886		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Robert E. Bollengier			Contact Title Attorney / C.P.A.				
Street Address 3210 Post Road, Box 7831		City Warwick	State RI	^{Zip} 02887-7831			
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							
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 Date							
Gan A. Darr					3/16		
Signature of Authorized Person							
V Sets &							
77 9							

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
UEU 0 1 2016

BY 1015 DS

FORM 632 - Revised: 08/2016