Sept.
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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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Entity ID Number	2. Exact name of the Limited Liability Company						
298462	Hopkins Properties, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53 - Real Estate and Rental and	Real estate holding						
5. State of Formation							
RI							
6. Principal Office Address			City	State	Zip		
11 Pioneer Avenue			Rumford	RI	02916		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name William A. Hopkins			Contact Title Member				
Street Address 11 Pioneer Avenue			City Rumford	State RI	<sup>Zip</sup> 02916		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name None Ma			Manager Name None				
Street Address		Street Address					
City	State	Zip	City	State	Zip		
Manager Name None			Manager Name None				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an attachment							
9. Resident Agent in Rhode Island	d. This informat	ion is currently of reco	ord with the Department of S	tate. 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							
William A. Hopkins, Member			12-2	-2016			
Signature of Authorized Person  WILLIAM C. HOPKING  SIGN DOCUMENT 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 FILED R

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