State of Rhode Island and Providence Plantations						
Department of S	tate - Bu	siness Service	es Division			
Annual Report for the year: 2015 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.					R.J. DER . OF \$1.20 BUSSOV	
1. Entity ID Number 000160570	Exact name of the Limited Liability Company BELCHER'S VIEW, LLC				10: 55	
3. NAICS Code 53 - Real Estate and Rental ar	Brief description of the character of business conducted in Rhode Island REAL ESTATE					
5. State of Formation RI						
6. Principal Office Address 188 MARKET STREET			City WARREN	State RI	Zip 02885	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name PAUL SAMPSON			Contact Title MEMBER			
Street Address 91 RESERVOIR AVENUE			City SWANSEA	State MA	^{Zip} 02777	
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 ind		
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		
PAUL SAMPSON				12/06/16	12/06/16	
Signature of Authorited Person 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

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FORM 632 - Revised: 08/2016