



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR **2016**

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 1077774		2. Exact name of the limited liability company 710 TIOGUE AVENUE LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To engage in any and all lawful business activities. INCLUDING BUT NOT LIMITED TO REAL ESTATE DEVELOPMENT			
5. Principal office address 312 Murphy Road		City Hartford		State CT	Zip 06114
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Joseph Sullo		Contact Title Manager			
Street Address 312 Murphy Road		City Hartford		State CT	Zip 06114
7. LIST <u>ALL</u> MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name		Manager Name			
State		Street Address			
Zip		City		State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City		State		Zip	
City		State		Zip	
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

DEC 22 2016

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BY 11137

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Authorized Person

Joseph Sullo

Print or Type Name of Authorized Person

Date

12-1-16