



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 16

1. ID No. 000420205

2. Exact Name of the Limited Liability Company Pine Ledge Aviation LLC

3. State of Formation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 81

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

PURPOSE OF LLC IS TO ADMINISTER PARTNERSHIP IN PIPER AIRCRAFT ARROW
PA28R/200 N44157 SER #28R
7435299

5. Principal Office Address

No. and Street: 103 PINE LEDGE ROAD
City or Town: GREENVILLE State: RI Zip: 02828 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: MICHAEL ROBINSON Contact Title: PRESIDENT
No. and Street: 103 PINE LEDGE ROAD
City or Town: GREENVILLE State: RI Zip: 02828 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	WILLIAM DAVIS MR.	519 TRIMTOWN RD

		SCITUATE, RI 02857 USA
MANAGER	CHARLES HARTLEY MR.	1861 SNAKE HILL RD CHEPACHET, RI 02814 USA
MANAGER	MICHAEL B. ROBINSON	103 PINE LEDGE ROAD GREENVILLE, RI 02828 USA
MANAGER	MICHAEL ROBINSON	103 PINE LEDGE ROAD GREENVILLE, RI 02828

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

MICHAEL B. ROBINSON 103 PINE LEDGE ROAD GREENVILLE , RI 02828

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 27 Day of April, 2017 at 10:51:51 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By MICHAEL ROBINSON
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations
All Rights Reserved