


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 2017

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. <u>000-794090</u>		2. Exact name of the limited liability company <u>DRE PROPERTIES, LLC</u>			
3. State of Formation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>RENTAL PROPERTIES</u>			
5. Principal office address <u>5 TILDEN AVENUE</u>		City <u>WARWICK</u>	State <u>RI</u>	Zip <u>02888</u>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY (NAME)					
Contact Name <u>DEBRA DALPE</u>		Contact Title			
Street Address <u>5 TILDEN AVE</u>		City <u>WARWICK</u>	State <u>RI</u>	Zip <u>02888</u>	
7. LIST ALL MANAGERS (OWNERS AND MANAGERS OF THE COMPANY) (NAME AND ADDRESS) (SEE INSTRUCTIONS FOR MEMBERS) ("X" BOX FOR ATTACHMENT) ☐					
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
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

MAY 11 2017

BY 803389

A.A. 8:54 AM

 2017 MAY 11
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 RI, DEPT OF STATE
 DIVISION OF BUSINESS SERVICES

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.

Debra Dalpe
 Signature of Authorized Person

5.12.17
 Date
DEBRA DALPE

Print or Type Name of Authorized Person