State of Rhode Island and Providence Plantations Office of the Secretary of State         Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040         UIMITED Liability Company Annual Report         Filing Period: September 1 - November 1         Intercent Company Annual Report         Filing Period: September 1 - November 1         Intercent Company Annual Report         Annual Report         Filing Period: September 1 - November 1         Intercent Company Annual Report within Hird (20) days after the time presended by law (R.I.G.L. 7- 1660(bkc)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2017         1. ID No. 000121032         2. Exact Name of the Limited Liability Company EVAN REALTY ASSOCIATES, LLC         State: []         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         531120         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         OWN AND OPERATE REAL PROPERTY         5. Principal Office Address         No. and Street: 28 COULTER DRIVE City or T					
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 lile 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: 2017         1. ID No. 000121032         2. Exact Name of the Limited Liability Company EVAN REALTY ASSOCIATES, LLC         3. State of Formation State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         531120         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island OWN AND OPERATE REAL PROPERTY         5. Principal Office Address         No. and Street:       28 COULTER DRIVE City or Town:       Zite Contact Title: No. and Street:       20.00X 408 City or Town:       Zite Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name: PATRICLE EVANGELISTA Contact Title: No. and Street:       P.O. BOX 408 City or Town:       Zithe STOWN       State: Ri       <	s s			Fee: \$50.00	
(401) 222-3040         Limited Liability Company Maining or refusing to the second or refusion the second or refusion or refusi		148 W. River S	treet		
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DO NOT LIST MEMBERS       Title     Individual Name     Address	City or Town: <u>JA</u>	<u>IMESTOWN</u> State: <u>RI</u>	Zip: <u>02835</u> Country:	USA	
First, Middle, Last, Suffix         Address, City or Town, State, Zip Code, Country	Title	Individual Name	Address		
		First, Middle, Last, Suffix	Address, City or Town, State, Zip C	ode, Country	
	O. RESIDENT AGENT IN	RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JAMES H. HAHN, ESQ. 40 WESTMINSTER STREET, SUITE 1100 PROVIDENCE, RI 02903

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

**Signed this 8 Day of September, 2017 at 10:57:43 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 <u>PATRICIA A. EVANGELISTA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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