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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Annual Report for the year: 2016
Limited Liability Company '2017 SEP

2017 SEP -8 PH 12: 54

→ Filing period. September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1 Entity ID Number	2. Exact name of the Limited Liability Company				
00879054	J. Castagnaro Realty LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
53 - Real Estate and Rental ar	To anguge m, conduct, mannam and carry on the bachhood of roal coated adjustinent,				
5. State of Formation	development, sale, leasing and management				
RI					
6. Principal Office Address			City	State	Zip
34 Quissett Road			Mendon	MA	01756
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name John Castagnaro			Contact Title		
Street Address 34 Quissett Road			City Mendon	State MA	^{Zip} 01756
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name John Castagnaro			Manager Name		
Street Address 34 Quissett Road			Street Address		
City Mendon	State MA	^{Z_{ip}} 01756	City	State	Zip
Manager Name	_	_	Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Check the box to indicate an attachment					
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					
John Castagnaro 8/17/17					
Signature of Authorized 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

12:56

FILED

SEP 0 8 2017

FORM 632 - Revised: 02/201