	S	State of Rhode Island and Office of the Sec			S Fee: \$50.00
		Division Of Bus	iness Service	S	
		148 W. Riv			
lunation		Providence RI (401) 222			
HOPE					
Limited Liabil Annual Report	-	ipany			
Filing Period: Sep		- November 1			
In accordance wit	th RIGI	. 7-16-66(d), each limited liability	company fail	ina or refusina	
		in thirty (30) days after the time p			
16-66(b&c)) is su	bject to a	penalty fee of \$25.00.			
ANNUAL REPOR	RT YEAR:	: <u>2017</u>			
1. ID No. <u>0</u> 0	0068614	7			
2. Exact Name of the Limited Liability Company THE HUMPHREY FAMILY LLC					
3. State of Form	mation				
State: <u>RI</u>					
		ARTICLE	ш		
Enter the six digit NAICO Code that best describes the primery business conducted by the artity. Developed					
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.					
501110					
<u>531110</u>					
4. Brief Descrip	tion of th	ne Character of the Business V	hich is Actu	ally Conducted	in Rhode Island
REAL ESTATE	<u>-</u>				
5. Principal Offi	ce Addre	255			
No. and Street:	PARTI	RIDGE SNOW & HAHN LLF	) -		
	-	STMINSTER ST., SUITE 100	_	DI 0200	
City or Town:	PROV	<u>IDENCE</u>	State	<u>RI</u> Zip: <u>0290</u>	<u>3</u> Country: <u>USA</u>
6. Mailing Addr	ess of Li	mited Liability Company and I	Name or Title	e of Contact Per	son:
Contact Name:	Contact				
No. and Street:	-	NANAQUAKET ROAD BOX 39			
City or Town:	-	RTON	State: <u>RI</u>	Zip: <u>02878</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.					
DO NOT LIST	MEMBE	RS			
Title		Individual Name		Addre	SS

First, Middle, Last, Suffix

SCOTT HUMPHREY

MANAGER

Address, City or Town, State, Zip Code, Country

268 NANAQUAKET ROAD

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

DEBORAH DINARDO, 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 11 Day of September, 2017 at 10:27:46 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>SCOTT HUMPHREY</u> Signature of Authorized Per

Signature of Authorized Person

Form No. 632 Revised 09/07

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