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State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

STAMP

Annual Report for the year: Limited Liability Company

2017

→ 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						
790042	ARK Properties, LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
531110	To hold and manage Real Estate						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
1988 Louisquisset Pike			Manager	RI	02865		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Michael F. Elliott			Contact Title Manager				
Street Address 1988 Louisquisset Pike			City Lincoln	State RI	<sup>Zip</sup> 02865		
8. List ALL managers (names ar		the Limited Liabil	lity Company, IF APPLICAB	LE - DO NOT LIST MI	EMBERS		
Manager Name Michael F. Elliott			Manager Name John Trojan, Jr.				
Street Address 1988 Louisquisset Pike			Street Address 1988 Louisquisset Pike				
City Lincoln	State RI	<sup>Zip</sup> 02865	City Lincoln	State RI	Z <sub>IP</sub> 02865		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zip		
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	Data						
Michael F. Elliott				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9(·Zd.17		
Signature of Authorized Person SIGN DOCUMENT HERE							

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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