STAMP

Annual Report for the year: **Limited Liability Company** 

→ Filing period: September 1 - November 1

and

→ Filing Fee: \$50.00

6. Principal Office Address

Contact Name Janice Parenteau

Street Address 25 Blackstone Street

25 Blackstone Street

Manager Name

Street Address

City

1. Entity ID Number

3. NAICS Code

310405

RI

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

8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

2 Evacto	ame of the Limite	d Liability Company		<u></u>			
	ı Family Realty,	, , ,					
	-	naracter of business conducted	in Rhode Island				
Real esta	te investment an	nd management.					
		City	State	Zıp			
		Bellingham	MA	02019			
ility Compa	any and Name or	Title of Contact Person					
	_	Contact Title Member					
et		City Bellingham	State MA	Z <sub>I</sub> P 02019			
d addresse	s) of the Limited I	Liability Company, IF APPLICAE	BLE - DO NOT LIST N	AEMBERS			
		Manager Name	Manager Name				
	•	Street Address	Street Address				
State	Zip	City	State	Zip			
		Manager Name	I				
-		Street Address					

Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
		<u> </u>		Check the box to	indicate an attachm	
9. Resident Agent in Rh	ode Island. This inform	nation is currently	of record with the Department of S	tate. Changes require fi	ling Form 642.	
Under penalty of perju statements, and that a			examined this report, includi true and correct.	ing any accompanyi	ng schedules and	
Name of Authorized Per	son		·	Date	Date	
Janice Po	renteau					
Signature of Aythorized	Person Went	SIGN	DOCUMENT HERE	9-/	19-17	
0			<b>P1</b> 0 E		•	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov