Annual Report for the year: 2017
Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

						
Entity ID Number	2. Exact name of the Limited Liability Company					
1335381	182 RHOD	182 RHODES LLC				
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island Real estate					
5. State of Formation	Ť					
Rhode Island						
6. Principal Office Address			City	State	Zip	
393 Reservoir Road			Cumberland	Ri	02864	
7. Mailing Address of Limited Li	iability Compa	ny and Name or	Title of Contact Person	<u>l</u>		
Contact Name Glenn Bruno			Contact Title	Contact Title		
Street Address 393 Reservoir Road			City Cumberland	State RI	Z _{IP} 02864	
8. List ALL managers (names a	and addresses	s) of the Limited I	Liability Company, IF APPLICAB	LE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	_1		<u>-</u>	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						
Glenn Bruno 9/36/17					6/17	
Signature of Authorized Person Signature of Authorized Person President						
9. Resident Agent in Rhode Isla Under penalty of perjury, I de statements, and that all state Name of Authorized Person Glenn Bruno	and. This inform iclare and aff ments contai	nation is currently of irm that I have elined herein are	of record with the Department of State examined this report, including true and correct.	Check the box to the Changes require filing any accompanying	indicate an	

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

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