RI SOS Filing Number: 201750974120 Date: 10/4/2017 2:34:00 PM



# State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

### Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2017

**1. ID No.** 001022172

- 2. Exact Name of the Limited Liability Company BT Hotel Operating LLC
- 3. State of Formation

State: DE

#### **ARTICLE III**

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.

561110

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

#### **HOTEL & RESTAURANT**

#### 5. Principal Office Address

No. and Street: 4300 MARSH RIDGE ROAD

**SUITE 110** 

City or Town: CARROLLTON State: TX Zip: 75010 Country: USA

#### 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: MICHAEL LANDRENEAU Contact Title: VP ACCOUNTING

No. and Street: 4300 MARSH RIDGE ROAD, SUITE 110

City or Town: CARROLLTON State: TX Zip: 75010 Country: USA

## 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	MICHAEL LANDRENEAU	4300 MARSH RIDGE RD CARROLLTON, TX 75010 UNI

MANAGER	RYAN TOTARO	4300 MARSH RIDGE ROAD, SUITE 110
		CARROLLTON, TX 75010 USA

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

RICHARD NADEAU, ESQ. C/O PARTRIDGE SNOW & HAHN LLP 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 4 Day of October, 2017 at 2:36:05 PM 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 /MICHAEL LANDRENEAU/ Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved