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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.	

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Entity ID Number	2. Exact name of the Limited Liability Company					
000141441	Hampton Family III, L.L.C.					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531110	Acquiring, developing, leasing, selling, and otherwise dealing in Real Property.					
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
5 Albany Road		Warwick	RI	02888		
7. Mailing Address of Limited Lia		y and Name or Tit				
Contact Name Jonathan V. Kalander		Contact Title Attorney				
Street Address 931 Jefferson Boulevard, Suite 2004		City Warwick	State RI	Zip 02888		
8. List ALL managers (names ar	nd addresses)	of the Limited Lia	bility Company, IF APPLICA	ABLE - DO NOT LIST N	MEMBERS	
Manager Name Amy R. Bishop			Manager Name Dana A. Bishop			
Street Address 168 Old Plainfield Pike		Street Address 168 Old Plainfield Pike				
City Foster	State RI	Zip 02825	City Foster	State RI	^{Zip} 02825	
Manager Name			Manager Name			
Street Address		Street Address				
City	State	Zip	City	State	Zip	
	1 _	<u> </u>		Check the box to it	ndicate an attachment	
9. Resident Agent in Rhode Islan	nd. This informa	tion is currently of re	cord with the Department of S	tate. Changes require filin	g Form 642.	
Under penalty of perjury, I dec statements, and that all staten				ing any accompanyin	g schedules and	
Name of Authorized Person				Date	2-1-	
Amy R. Bishop	_			19/2	2/8017	
Signature of Authorized Person	lim	JR: BO	MENT HERE	<i>-</i>	7	
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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 N

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