



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

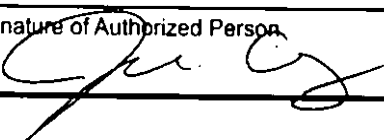
Annual Report for the year: 2017

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.

1. Entity ID Number 1065134		2. Exact name of the Limited Liability Company Old Town Holdings, LLC			
3. NAICS Code 53110		4. Brief description of the character of business conducted in Rhode Island Purchase, ownership, management, rental and sale of real estate.			
5. State of Formation RI					
6. Principal Office Address 290 Irving Avenue		City Providence		State RI	Zip 02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Joanne Chang			Contact Title Member		
Street Address Same as above			City		State
			Zip		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name None			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Joann Chang				Date 09/02/17	
Signature of Authorized Person 					
SIGN DOCUMENT HERE					

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

OCT 10 2017

BY

FORM 632 - Revised: 02/2017