RI SOS Filing Number: 201751420860 Date: 10/11/2017 4:00:00 PM

_
(3)

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	2. Exact name of the Limited Liability Company					
147437	Compass Circle, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
531390	Real Estate					
5. State of Formation						
Rhode Island						
6 Principal Office Address			City	State	Zip	
128 Carroll Avenue			Newport	RI	02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Richard C. Grosvenor			Contact Title	Contact Title		
Street Address 128 Carroll Avenue			City Newport	State RI	^{Zıp} 02840	
8 List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name	Manager Name		
Street Address			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						
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						
RICHARD C. CHOSUBNOR 10/5/17						
Signature of Authorized Person						
SIGN DCCUMENT HERE						
γ						

MAIL TO:

Division of Business Services

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

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

OCT 1 1 2017