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 825609	2. Exact name of the Limited Liability Company DPSB Holdings, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Real estate holding				
53/1/0					
5. State of Formation RI					<u></u>
6. Principal Office Address			City	State	Zıp
420 Chestnut Street			Seekonk	MA	02771
7. Mailing Address of Limited Li	ability Company	y and Name or Tit			
Contact Name Daniel M. Leite			Contact Title Manager		
Street Address 420 Chestnut Street			City Seekonk	State MA	^{Zip} 02771
8. List ALL managers (names a		of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST N	IEMBERS
Manager Name Daniel M. Leite			Manager Name None		
Street Address 420 Chestnut Street			Street Address		
^{City} Seekonk	State MA	^{Zip} 02771	City	State	Zip
Manager Name None			Manager Name None		
Street Address			Street Address		
City	State	Zıp	City	State	Zıp
· · -	1	- - .l .		Check the box to in	ndicate an attachment
9. Resident Agent in Rhode Isla	ind. This informat	tion is currently of re	ecord with the Department of St	ate. Changes require filin	g Form 642.
Under penalty of perjury, I de statements, and that all state			•	ng any accompanying	g schedules and
Name of Authorized Person				Date	
Daniel M. Leite, Member					
Signature of Authorized Person	m. Le	ite SIGN DI	OCUMENT 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 1 6 2017

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