

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2015
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

R.I. DEEPT OF STATE BUS SVCS DIV	į
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1 Entity ID Number	2 Exactin	ame of the Limit	ed Liability Company			
182197000	West	edy Nina	In and 11-C			
3 NAICS Code	4 Brief de	escription of the c	character of business conducted in	n Rhode Island		
153119n	I					
5 State of Formation	Real estate investment, rental and leasing					
Rhode Island						
6 Principal Office Address			City	State	Zip	
39 Herce 24.			Westerly	RI	02891	
7 Mailing Address of Limited L Contact Name	lability Comp.	any and Name o	···			
WILLIAM A. NARDONE			Recustered Scent			
Street Address 42 Granite St.			City Westerly	State RT	10000	
Manager Name	and addresse	s) of the Limited	Liability Company IF APPLICAB	LE - DO NOT LIST N	MEMBERS	
- Worlager Harrie	Manager Name — — — — — — — — — — — — — — — — — — —					
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address	Stool Address		
<u> </u>						
City	State	Zip	City	State	Ζιр	
Check the box to indicate an attachment						
Under negative of participated	and This infor	nation is currently	of record with the Department of Stat	e. Changes require filing	Form 642	
statements, and that all state	eciare and afi ements conta	urm that I have ined herein are	examined this report, including true and correct.	any accompanying	schedules and	
Name of Authorized Person				Date		
Gary Gencarella				10/10/1-1		
Signature of Authorized Person						
Dany Gun	Ma					
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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.n.gov

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FORM 632 - Revised | 08/2017