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

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 R.E. Johnston Family, LLC							
· · · · · · · · · · · · · · · · · · ·			cter of business conducted in Rhode Island manange, lease and sell real estate.				
5. State of Formation RI							
6. Principal Office Address c/o Capstone Properties, 5	Burlington W	oods	City Burlington	State MA	Zip 01803		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Paul Griesinger			Contact Title Manager				
Street Address 5 Burlington We	oods		City Burlington	State MA	^{Zip} 01803		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Paul Griesinger	•		Manager Name				
Street Address 5 Burlington Wo	oods		Street Address				
City Burlington	State MA	^{Zip} 01803	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 /6 //6	// 7			
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 1 8 2017 (0.5)