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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017 **Limited Liability Company**

STAMP

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- → 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 950805	2. Exact name of the Limited Liability Company 49 CEDAR SWAMP REALTY, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
531120	REAL ESTATE HOLDINGS				
5. State of Formation	1				
RI					
6. Principal Office Address			· City	State	Zip
49 CEDAR SWAMP ROAD			SMITHFIELD	RI	02917
7 Mailing Address of Limited Lia	ibility Compan	y and Name or T			
Contact Name ALLEN PACHECO			Contact Title MEMBER		
Street Address 49 CEDAR SWAMP ROAD			City SMITHFIELD	State RI	^{Zip} 02917
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	<i>Z</i> ıp	City	State	7 ı p
		1	,	Check the box to	ndicate 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	
ALLEN PACHECO				(0-0	8-17
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

