



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2017

**1. ID No.** 000793542

**2. Exact Name of the Limited Liability Company** WINSTANLEY PROPERTY MANAGEMENT, LLC

**3. State of Formation**

State: DE

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531311

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

THE BUSINESS ACTIVITY AND PURPOSES OF THE COMPANY SHALL BE TO ENTER INTO AND PERFORM UNDER PROPERTY MANAGEMENT AGREEMENTS AND TO UNDERTAKE SUCH OTHER ACTIONS AS THE MANAGING MEMBER SHALL BE DECIDE.

**5. Principal Office Address**

No. and Street: 150 BAKER AVENUE EXTENSION  
SUITE 303

City or Town: CONCORD

State: MA Zip: 01742 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: ADAM D. WINSTANLEY Contact Title: A MANAGER

No. and Street: C/O WINSTANLEY ENTERPRISES LLC  
150 BAKER AVENUE EXT. SUITE 303

City or Town: CONCORD

State: MA Zip: 01742 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

COGENCY GLOBAL INC. 222 JEFFERSON BOULEVARD WARWICK , RI 02888

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 23 Day of October, 2017 at 10:58:48 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By ADAM D. WINSTANLEY  
Signature of Authorized Person

Form No. 632  
Revised 09/07