State of Rhode Island and Providence Plantations Department of State - Business Services Division					
Annual Report for the year:	2017				

Limited Liability Co	mpany	
→ Filing period: Septe→ Filing Fee: \$50.00	mber i - November i	
→ 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	
000000004		

1. Entity ID Number 000836664	2. Exact name of the Limited Liability Company CPI CRANSTON II LLC						
3. NAICS Code 531311 5. State of Formation RI	Brief description of the character of business conducted in Rhode Island REAL ESTATE						
6. Principal Office Address 235 MOORE STREET			City HACKENSACK	State NJ	Zip 07601		
7. Mailing Address of Limited Lia	ability Company	and Name or Tit	le of Contact Person				
Contact Name			Contact Title	Contact Title			
Street Address 235 MOORE STREET			City HACKENSACK	State NJ	Zip 07601		
8. List ALL managers (names a		of the Limited Lia	bility Company, IF APPLICABL	E - DO NOT LIST N	/EMBERS		
Manager Name PETER O HANSO	ON		Manager Name				
Street Address 235 MOORE STREET		Street Address	Street Address				
City HACKENSACK	State NJ	^{Zip} 07601	City	State	Zip		
Manager Name	•		Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
			·	Check the box to i	ndicate an attachment		
9. Resident Agent in Rhode Islan	nd. This informat	tion is currently of re	ecord with the Department of State	. Changes require film	g Form 642.		
Under penalty of perjury, I dec statements, and that all staten				any accompanying	g schedules and		
Name of Authorized Person				Date			
PETER O HANSON A COMMENT				8/29/17			
Signature of Authorized Person		SIGN D	OOCUMENT 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



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