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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2017

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.	2. Exact name of the limited liability company				
160557	Coast Realty, LLC				R.J. DE BUS 2017 OCT
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island			00 8:	
RI	Real estate and commercial vehicle leasing # 53190			REC DEPI US S CT 21	
5. Principal office address 1 Realty Way			City East Providence	State RI	02914 CS
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y,COMPANY AND NA	AME OR TITLE OF CONTACT PERS	SON: TELEPA	MARCH CONTRACTOR
Contact Name John Pesce			Contact Title Manager		11:11 VIE
Street Address 1 Realty Way			City East Providence	State RI	Zip 02914
7. LIST <u>ALL</u> MANAGERS (("X" BOX FOR ATTACHI		RESSES) OF THE LI	MITED LIABILITY COMPANY, IF AF	PLICABLE - <u>DO N</u>	OT LIST MEMBERS
Manager Name John Pesce			Manager Name		
Street Address 1 Realty Way			Street Address		
City East Providence	State RI	Zip 02914	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	Stale	Zip	City	State	Zip
8. RESIDENT AGENT IN RI	HODE ISLAND				
This information is curren	tly of record in th	Office of the Secret	ary of State. Changes require fillne	g Form 642.	

FILED

OCT 24 2017

BY 27 315 579

File Date	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.		
Check No	2-Pere 10/12/1	フ	
By:	Signature of Authorized Person Date	•	
FOR SECRETARY OF STATE USE ONLY	John Pesce		
	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012