



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

STAMP

FOR
SECRETARY OF STATE
USE ONLY

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 796023		2. Exact name of the Limited Liability Company QUAKER ACRE, LLC			
3. NAICS Code 53 - Real Estate and Rental ar		4. Brief description of the character of business conducted in Rhode Island OWNERSHIP AND OPERATION OF RESIDENTIAL REAL ESTATE			
5. State of Formation RHODE ISLAND		531390			
6. Principal Office Address 900 HARVARD PLACE			City CHARLOTTE	State NC	Zip 28207
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name D. BRADFORD BARRETT			Contact Title MEMBER		
Street Address 900 HARVARD PLACE			City CHARLOTTE	State NC	Zip 28207
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	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person D. BRADFORD BARRETT				Date 10/6/17	
Signature of Authorized Person <i>D. Bradford Barrett</i> 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

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