s s	itate of Rhode Island and P Office of the Secre		DNS Fee: \$50.00	
	Division Of Busine			
	148 W. River			
	Providence RI 02			
HOPE	(401) 222-3	040		
Limited Liability Com	pany			
Annual Report Filing Period: September 1	- November 1			
ning renou. September r				
	7-16-66(d), each limited liability co in thirty (20) days after the time pro			
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			
<b>1. ID No.</b> <u>00050642</u>	<u>1</u>			
2. Exact Name of the Limited Liability Company JMG PROPERTIES, LLC				
3. State of Formation				
State: <u>RI</u>				
	ARTICLE III			
<u>531110</u>	e information on <u>NAICS</u> can be four	d online.		
4. Brief Description of th	e Character of the Business Whi	ch is Actually Conduct	ed in Rhode Island	
REAL ESTATE HOLDI	NGS			
5. Principal Office Addre	SS			
	<u>CAPRI DRIVE</u> DHNSTON State: F	I Zip: 02919	Country: <u>USA</u>	
<u>50</u>		<u>1</u> Zip. <u>02717</u>	Country: <u>USA</u>	
6. Mailing Address of Lin	mited Liability Company and Nai	ne or Title of Contact	Person:	
Contact Name: Contact	Title:			
			0	
City or Town: <u>JO</u>	HNSTON State: R	<u>l</u> Zip: <u>02919</u>	Country: <u>USA</u>	
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Li RS	ability Company, if Ap	plicable.	
Title	Individual Name Address		dress	
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country	
MANAGER	WILLIAM M GERIBO		19 CAPRI DRIVE JOHNSTON, RI 02919 USA	
MANAGER	CATHERINE M. GERIBO	19 CAPRI DRIVE		

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

WILLIAM GERIBO 19 CAPRI DRIVE JOHNSTON, RI 02919

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

**Signed this 7 Day of November, 2017 at 9:12:43 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 <u>WILLIAM GERIBO</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$  2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved