RI SOS Filing Number: 201753179630 Date: 11/9/2017 4:00:00 PM

/EZ\
1 1 2 1

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

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 <b>951354</b>	2. Exact name of the Limited Liability Company Spring Creek, LLC					
3. NAICS Code 531390	4. Brief description of the character of business conducted in Rhode Island  Real Estate					
5. State of Formation RI						
6. Principal Office Address  122 Touro Street			City Newport	State RI	Zip <b>02840</b>	
7. Mailing Address of Limited Lia	bility Company a	ind Name or Title				
Contact Name Turner C. Scott			Contact Title Registered Agent			
Street Address 122 Touro Street			City Newport	State RI	<sup>Zip</sup> <b>02840</b>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name  OF DEC C SO (+++			Manager Name			
Street Address Touro Street			Street Address			
Privat	State	(5)84D	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		<u> </u>	<del></del>	Check the box to inc	licate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
Under penalty of perjury, I dec statements, and that all statem				ing any accompanying	schedules and	
Name of Authorized Person				Date		
TURNER C. SOUT			10/20/17			
Signature of Authorized Person						

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

NOV 0 9 2017

FORM 632 - Revised: 08/2017