



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 001665463		2. Exact name of the Limited Liability Company SPF Distressed Fund LLC			
3. NAICS Code 525990		4. Brief description of the character of business conducted in Rhode Island Private Finance			
5. State of Formation Delaware					
6. Principal Office Address 8805 Tamiami Trail North, Suite 129		City Naples	State FL	Zip 34108	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Whitney Quillen			Contact Title Authorized Person		
Street Address 8805 Tamiami Trail North, Suite 129			City Naples	State FL	Zip 34108
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.					
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.					
Name of Authorized Person Whitney Quillen				Date November 7, 2017	
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

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