



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

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2017 NOV 29 AM 11:51

**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>000789343</b>		2. Exact name of the Limited Liability Company <b>AP Properties, LLC</b>			
3. NAICS Code <b>531120</b>		4. Brief description of the character of business conducted in Rhode Island <b>To buy, sell, lease, rent, pledge, mortgage, and develop real estate and to carry on any lawful business, trade, purpose, or activity.</b>			
5. State of Formation <b>Massachusetts</b>					
6. Principal Office Address <b>163 Washington Street</b>			City <b>Auburn</b>	State <b>MA</b>	Zip <b>01501</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Barry Lundgren</b>			Contact Title <b>Manager</b>		
Street Address <b>163 Washington Street</b>			City <b>Auburn</b>	State <b>MA</b>	Zip <b>01501</b>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>Barry Lundgren</b>			Manager Name <b>Patrick Lundgren</b>		
Street Address <b>163 Washington Street</b>			Street Address <b>163 Washington Street</b>		
City <b>Auburn</b>	State <b>MA</b>	Zip <b>01501</b>	City <b>Auburn</b>	State <b>MA</b>	Zip <b>01501</b>
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.					
<b>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.</b>					
Name of Authorized Person <b>Barry Lundgren</b>				Date <b>11-28-17</b>	
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 29 2017**

BY

FORM 632 - Revised: 10/2017