

State of Rhode Island and Providence Plantations

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

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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 000133222	2. Exact name of the Limited Liability Company 22 Spring Street, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531110	Property Management				
5. State of Formation					
RI				_	
6. Principal Office Address			City	State	Zip
182 Diamond Hill Road			Ashaway	RI	02804
7. Mailing Address of Limited Lia	ability Compa	ny and Name o	r Title of Contact Person	·	
Contact Name Linda Saint			Contact Title Member		
Street Address 182 Diamond Hill Road			City Ashaway	State RI	<sup>Zip</sup> 02804
8. List ALL managers (names a	nd addresses	) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
<del></del>	<u> </u>			Check the box to i	indicate an attachment
9. Resident Agent in Rhode Isla	nd. This inform	ution is currently	of record with the Department of S	tate. Changes require filir	ng Form 642.
Under penalty of perjury, I dec statements, and that all states	ciare and affi ments contai	ikm that I have ined herein are	examined this report, includi true and correct.	ng any accompanyin	g schedules and
Name of Authorized Person				Date	
Linda Saint				1/31/2018	
Signature of Authorized Person		SIG	IN 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 10:53

FILED

FEB 1 4 2018

FORM 632 - Revised: 10/2017