State of Rhode Island and Providence Plantations

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

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SECRETARY OF STATE
CORPORATIONS DIV

2018 APR -2 AM 10: 14

## Annual Report for the year: 2007 **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 000159764	2. Exact name of the Limited Liability Company  Thirty Seven William Street, LLC					
3. NAICS Code	<u> </u>	Brief description of the character of business conducted in Rhode Island				
<b>631390</b>	Condominium association					
5. State of Formation				•	-	
Rhode Island						
6. Principal Office Address			City	State	Zip	
37 William Street			Newport	Rhode Island	02840	
7. Mailing Address of Limited L	iability Compa	any and Name or	Title of Contact Person			
Contact Name Scott Newcombe			Contact Title	Contact Title		
Street Address 116 Bonner Lan	10		City Mooresville	State NC	<sup>Zip</sup> <b>28117</b>	
8. List ALL managers (names	and addresses	s) of the Limited I	Liability Company, IF APPLICAB	LE - <b>do not list me</b> i	MBERS	
Manager Name			Manager Name	Manager Name		
Street Address			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						
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 de statements, and that all state			examined this report, including true and correct.	any accompanying s	chedules and	
Name of Authorized Person				Date	Date	
Rebecca Clarke Turmei				3/21/2018	3/21/2018	
Signature of Authorized Person						
Rebecca Clare Jumel						

10:15 AM

MAIL TO:

**Division of Business Services** 

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

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