

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2018

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 529247		2. Exact name of the limited liability company The Wright Real Estate Connection, LLC				
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Real estate brokerage, marketing, sales and leasing (53(((0)))				
5. Principal office address 655 Main Street			City East Greenwich	State RI	Zip 02818	
6. MAILING ADDRESS OF	F LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT PE	RSON:		
Contact Name Rita Wright			Contact Title Member			
Street Address 655 Main Street			City East Greenwich	State RI	^{Żip} 02818	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACK		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF A	APPLICABLE - <u>PO</u>	NOT LIST MEMBERS	
Manager Name None			Manager Name			
Street Address			Street Address			
City	State	Zip	Сіту	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN I	RHODE ISLAND	1	<u> </u>	1	· <u>·</u>	
This information is curre	ntly of record in th	e Office of the Sec	retary of State. Changes require fill	ng Form 642.		

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JUL 3 1 2018

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File Date		this report, including any accompanying schedules and statements,		
	and that all statements coptained herein are true and correct.			
Check No		All Walter wanter 291 A		
		The way the fall the fact		
Bv:		Signature of Authorized Persen/ Date		
		Rita Wright, Member		
FOR SECRETARY OF STATE USE ONLY				
		Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012