State of Rhode Island and Providence Plantations Fee: \$50.00			
	Office of the Secreta		100.000
	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 14-2615	
I OFE			
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2018			
1. ID No. <u>000789775</u>			
2. Exact Name of the Limited Liability Company 7 WHISTLER POINT, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
4. Brief Description of the Character of the Business Which is Actually Conducted in Bhade Island			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
OWNS AND OPERATES REAL PROPERTY LOCATED IN RHODE ISLAND			
5. Principal Office Address			
No. and Street:9 MONADNOCK ROADCity or Town:WELLESLEYState:MAZip:02481Country:USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: WILLIAM S. WILSON Contact Title:   No. and Street: 9 MONADNOCK ROAD   City or Town: WELLESLEY   State: MA   Zip: 02481   Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip	Code, Country
MANAGER	WILLIAM S. WILSON	9 MONADNOCK I WELLELSEY, MA 0248	
MANAGER	J.H. TUCKER WILSON JR	58 LAMBERT ROAD	

58 LAMBERT ROAD

NEW CANAAN, CT 06840 USA

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JAMES P. REDDING, ESQ. 27 SAKONNET POINT ROAD LITTLE COMPTON, RI 02837

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 13 Day of August, 2018 at 12:00:08 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By <u>WILLIAM S. WILSON</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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