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

FILED

AUG 1 7 2018

BY _0008_

Annual Report for the year: _2018_
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	2. Exact name of the Limited Liability Company
001678245	JF HOXSIE LLC

3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island
531110	RESIDENTIAL RENTAL

5 State of Formation
RI

6 Principal Office Address	City	State	Zip
22 OCEAN RIDGE DRV.	CHARLESTOWN	RI	02813

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title
JAMES WAJDOWICZ	

Street Address	City	State	Zip
22 OCEAN RIDGE DR	CHARLESTOWN	RI	02813

8 List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS

Manager Name			Manager Name		
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 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.

Name of Authorized Person	Date
JAMES WAJDOWICZ	8/14/18
Signature of Authorized Person	

MAIL TO:
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148 W River Street. Providence. Rhode Island 02904-2615
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Website: www sos ri.gov

Revised: 10/2017