



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

**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. Entry ID Number<br><b>146487</b>   |                    | 2. Exact name of the Limited Liability Company<br><b>HOPE ARTISTE VILLAGE, LLC</b>                |                    |                          |     |
| 3. NAICS Code<br><b>531190</b>  |                    | 4. Brief description of the character of business conducted in Rhode Island<br><b>Real Estate</b> |                    |                          |     |
| 5. State of Formation<br><b>RI</b>  |                    |   |                    |                          |     |
| 6. Principal Office Address<br><b>1005 Main Street, Suite 1220</b>  |                    | City<br><b>Pawtucket</b>  | State<br><b>RI</b> | Zip<br><b>02860</b>      |     |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |                    |   |                    |                          |     |
| Contact Name<br><b>Michael Gazdacko</b>   |                    | Contact Title<br><b>VP Development</b>  |                    |                          |     |
| Street Address<br><b>1005 Main Street</b>   |                    | City<br><b>Pawtucket</b>  | State<br><b>RI</b> | Zip<br><b>02860</b>      |     |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS  |                    |   |                    |                          |     |
| Manager Name<br><b>Lance Jay Robbins</b>  |                    | Manager Name  |                    |                          |     |
| Street Address<br><b>PO Box 2109</b>  |                    | Street Address  |                    |                          |     |
| City<br><b>Hollywood</b>  | State<br><b>CA</b> | Zip<br><b>90078</b>   | City               | State                    | Zip |
| Manager Name  |                    | Manager Name  |                    |                          |     |
| Street Address  |                    | Street Address  |                    |                          |     |
| City  | State              | Zip   | City               | State                    | Zip |
| Check the box to indicate an attachment <input type="checkbox"/>  |                    |   |                    |                          |     |
| 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.   |                    |   |                    |                          |     |
| <i>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.</i> |                    |   |                    |                          |     |
| Name of Authorized Person<br><b>Michael Gazdacko</b>  |                    |   |                    | Date<br><b>8/20/2018</b> |     |
| Signature of Authorized Person<br>  |                    |   |                    |                          |     |

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
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**FILED**  
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