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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 788534	2. Exact name of the Limited Liability Company 429 WOOD STREET, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531110	OWNERSHIP AND MANAGEMENT OF INVESTMENT REAL ESTATE					
5. State of Formation]					
RI						
6. Principal Office Address			City	State	Zip	
99 TUPELO STREET			BRISTOL	RI	02809	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name EDWARD J COX II			Contact Title CFO			
Street Address 99 TUPELO STREET			City BRISTOL	State RI	^{Zip} 02809	
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	Zıp	
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						
EDWARD J COX II				08/21/18	08/21/18	
Signature of Authorized Person SIGN DOCUMENT HERE						

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

AUG 2 7 2018

FORM 632 - Revised: 10/2017