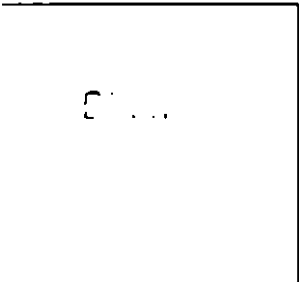




State of Rhode Island and Providence Plantations
Department of State - Business Services Division



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. Entity ID Number 1658236		2. Exact name of the Limited Liability Company 435 THAMES NEWPORT, LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island COMMERCIAL BUILDING			
5. State of Formation RI					
6. Principal Office Address 111 GULF ROAD		City SOUTH DARMOUTH	State MA	Zip 02748	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name KATHLEEN A. STAAB		Contact Title MANAGER			
Street Address 111 GULF ROAD		City SOUTH DARMOUTH	State ME	Zip 02748	
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 <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.					
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 KATHLEEN ANN STAAB				Date 8/23/2018	
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 27 2018
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