Si	tate of Rhode Island and Pr Office of the Secret		Fee: \$50.00
	Division Of Busines	s Services	
	148 W. River S		
	Providence RI 029		
HOPE	(401) 222-30	940	
Limited Liability Comp Annual Report Filing Period: September 1 -			
	7-16-66(d), each limited liability con n thirty (30) days after the time pres penalty fee of \$25.00.		
ANNUAL REPORT YEAR: 2018			
1. ID No. <u>000930888</u>			
2. Exact Name of the Limited Liability Company <u>ANYTIME REALTY LLC</u>			
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.			
<u>531210</u>			
4. Brief Description of the	e Character of the Business Whic	h is Actually Conducted in	Rhode Island
REAL ESTATE BROKE	<u>R</u>		
5. Principal Office Addres	SS		
No. and Street: 269 G	REENVILLE AVENUE		
		State: <u>RI</u> Zip: <u>02919</u> 0	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact 1	Fitle:		
	REENVILLE AVENUE		
City or Town: JOHNS	<u>SION</u> S	tate: <u>RI</u> Zip: <u>02919</u> C	Country: <u>USA</u>
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
8. RESIDENT AGENT IN R	HODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JONATHAN L. UCRAN 651 PUTNAM PIKE GREENVILLE, RI 02828

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

**Signed this 30 Day of August, 2018 at 3:18:45 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 JONATHAN UCRAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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