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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 162753	2. Exact name of the Limited Liability Company Steeple View East, Unit #5, LLC				
3. NAICS Code 5. State of Formation	Brief description of the character of business conducted in Rhode Island Commercial Real Estate				
Rhode Island					
Principal Office Address Cedar Avenue, Unit #5			City East Greenwich	State RI	Zip 02818
7. Mailing Address of Limited Lia	bility Company	y and Name or Tit	tle of Contact Person		
Contact Name Kevin P. Hagerty			Contact Title Manager		
Street Address 85 Cara Court			City North Kingstown	State RI	Zip 02852
8 List ALL managers (names ar	nd addresses)	of the Limited Lia	bility Company, IF APPLICABLE	- DO NOT LIST N	MEMBERS
Manager Name Kevin P. Hagerty			Manager Name		
Street Address 85 Cara Court			Street Address		
City North Kingstown	State RI	Zip 02852	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 Islan	nd This informat	tion is currently of re	ecord with the Department of State.	Changes require filin	g Form 642.
Under penalty of perjury, I dec statements, and that all staten			· · · · · · · · · · · · · · · · · · ·	ny accompanyin	g schedules and
Name of Authorized Person Kevin P. Hagerty, DMD				Date / ₹ \ /2018	
Signature of Authorized Person	-a-k	SIGN E	OCUMENT HERE	ر بروه تواند	

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
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FORM 632 - Revised: 10/2017