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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAMP

Annual Report for the year: 2018 **Limited Liability Company** 

FOR TRUETARY OF STATE USE OFLY

→ 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  | 2. Exact name of the Limited Liability Company |  |                                    |                             |                       |  |
|--|--|--|------------------------------------|-----------------------------|-----------------------|--|
| 75157  | 65 G   | 65 GOODING AVENUE, LLC   |                                    |                             |                       |  |
| 3. NAICS Code  | 4. Brief de                                    | Brief description of the character of business conducted in Rhode Island |                                    |                             |                       |  |
| 53110  | To acquir                                      | To acquire and invest in real property.                                  |                                    |                             |                       |  |
| 5. State of Formation  |  |  |                                    |                             |                       |  |
| Rhode Island   |  |  |                                    |                             |                       |  |
| 6. Principal Office Address  | 1  |  | City                               | State                       | Zip                   |  |
| 14 Broadcommon Road  | . !<br>. !                                     |  | Bristol                            | RI                          | 02809                 |  |
| 7. Mailing Address of Limited L  |  | any and Name o   | r Title of Contact Person          | •                           |                       |  |
| Contact Name Mary Lou Mancieri   |  |  | Contact Title                      |                             |                       |  |
| Street Address 14 Broadcommon Road   |  |  | City Bristol                       | State RI                    | <sup>Zip</sup> 02809  |  |
| 8. List ALL managers (names  | and addresse                                   | s) of the Limited  | Liability Company, IF APPLICA      | ABLE - DO NOT LIST N        | MEMBERS               |  |
| Manager Name of Control (Control (Contr |  |  | Manager Name                       | Manager Name .              |                       |  |
| treet Address  |  |  | Street Address                     | Street Address              |                       |  |
| City   | State  | Zip  | City                               | State                       | ZIp                   |  |
| Menager Name   |  |  | Manager Name                       |                             |                       |  |
| Street Address   |  |  | Street Address                     |                             |                       |  |
| City   | State  | Zip  | City                               | State                       | Zip                   |  |
|  |  |  |                                    | Check the box to in         | ndicate an attachment |  |
| 9. Resident Agent in Rhode Isla  | and. This infor                                | mation is currently  | of record with the Department of S | tate. Changes require filin | g Form 642.           |  |
| Under penalty of perjury, I de statements, and that all state  |  |  |                                    | ing any accompanyin         | g schedules and       |  |
| Name of Authorized Person<br>Mary Lou Mancleri   |  | •  |                                    | Date 9/7/18                 |                       |  |
| Signature of Authorized Person   | Z  | hur sig  | N 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

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XFORM 632 - Revised: 10/2017