State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAMP

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	2. Exact name of the Limited Liability Company		
000789825	MWA, LLC		
3. NAICS Code: 531120	4. Brief description of the character of business conducted in Rhode Island: REAL ESTATE		
5. State of Formation: RI			
6. Principal Office Address: 100 Clinton AVE	City: JAMESTOWN	State: RI	Zip: 02835
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: DARCY MAGRATTEN	Contact Title:		
Street Address: 108 Clinton AVE	City: JAMESTOWN	State: RI	Zip: 02835

8 List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name: DARCY MAGRATTEN	Manager Name: K. Wooley Dutton
Street Address: 100 clinton AVE	Street Address: PO BOX 517
City: JAMESTOWN State: RI Zip: 02835	City: ANNA MARIA State: FL Zip: 34216
Manager Name:	Manager Name:
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:

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
KATHRYN WOOLEY DUTTON	9/5/18

Signature of Authorized Person: Kathryn Wooley Dutton 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
SEP 11 2018
BY 3434 DS

FORM 632 - Revised: 10/2017