RI SOS Filing Number: 201877546800 Date: 9/17/2018 4:00:00 PM

State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year: 2018 Limited Liability Company	3″r⊅
 → Filing period: September 1 - November 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by December 1 	,

4.5 (4.15.1)	[a =]			_	
1 Entity ID Number	2. Exact name of the Limited Liability Company				
509208	1191 REALTY CO., LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531120	TO ENGAGE IN THE BUSINESS OF REAL ESTATE OWNERSHIP, MANAGEMENT AND DEVELOPMENT				
5. State of Formation					
RHODE ISLAND					
6. Principal Office Address		City	State	Zio	
1191 Hartford Avenue		Johnston	RI	02919	
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Agnes A. Mancini					
Street Address 1191 Hartford Ave	nue	City Johnston	State RI	Zip 02919	
8 List ALL managers (names an	id addresses) of the Limited Lia	bility Company, IF APPLICABLE - I	DO NOT LIST ME	MBERS	
Manager Name	Manager Name				
Street Address Street Address					
City	State	City	State	Zip	
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					
AGNES A. MANCINI					
Signature of Authorized Person Sign DOCUMENT HERE 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 1 4 2018

BY 1775

FORM 632 - Revised: 10/2017