RI SOS Filing Number: 201878953850 Date: 10/5/2018 4:00:00 PM

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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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 1657799	2. Exact name of the Limited Liability Company						
3. NAICS Code 53 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	4. Brief description of the character of business conducted in Rhode Island To buy, sell, hold and manage Real Estate						
Rhode Island	ļ 						
Principal Office Address Readway			City Providence	State RI	Zip 02909		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Thomas S. Hemmendinger			Contact Title Attorney				
Street Address 362 Broadway			City Providence	State RI	^{Zip} 02909		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Robert P. Ferris			Manager Name				
Street Address PO Box 814			Street Address				
City Shelter Island Heights	State NY	^{Zip} 11965	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 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		
Robert P. Ferris, Manager 08.25.18							
Signature of Authorized Person CGN DECLACIBLE FIRE							

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**

OCT 05 2018

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