RI SOS Filing Number: 201880008050 Date: 10/22/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: ____ Limited Liability Company

2018

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

FILED
OCT 2 2 2018
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1. Entity ID Number 001678678	1	2. Exact name of the Limited Liability Company Tucker Deacon, LLC						
3. NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island						
531311	Real Est	Real Estate Management						
5 State of Formation								
RHODE ISLAND				•				
6. Principal Office Address			City		State	Zip		
544 Middle Road				Portsmouth	RI	02871		
7 Mailing Address of Limited	Liability Compa	any and Name or	Title of Contac	ct Person				
Contact Name Lance Sleeper			Contact	Contact Title Member				
Street Address 544 Middle Road			City	Portsmouth	State RI	Zip 02871		
8. List ALL managers (names	and addresse	s) of the Limited	Liability Comp	any. IF APPLICABLE	- DO NOT LIST I	MEMBERS		
Manager Name			Manager	Manager Name				
Street Address			Street Ad	Street Address				
City	State	Zip	City		State	Zip		
Manager Name	 .	•	Manager	Name	<u> </u>			
Street Address			Street Ad	Street Address				
City	State	Zip	City		State	Zip		
· · ·			<u> </u>	C	heck the box to i	ndicate an attachment		
9. Resident Agent in Rhode Is	sland. This inform	mation is currently	of record with the	Department of State, C	Changes require filin	ig Form 642.		
Under penalty of perjury, I o statements, and that all stat					ny accompanyin	g schedules and		
Name of Authorized Person					Date			
Lance Sleeper					10/18	/18		
Signature of Authorized Perso	où 🔪 🗡	,				. W		
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CAUNIE /A	XXX	The contract of the contract o						

MAIL TO:

Division of Business Services

148 W. River Street. Providence. Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov