



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2018

**1. ID No.** 001684917

**2. Exact Name of the Limited Liability Company** Slingshot Properties, LLC

**3. State of Formation**

State: RI

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531390

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

THE OBJECT AND PURPOSE OF, AND THE NATURE OF THE BUSINESS TO BE CONDUCTED AND PROMOTED BY THE COMPANY IS TO OPERATE A DESIGN AND INNOVATION CONSULTANCY AND TO ENGAGE IN ANY OTHER LAWFUL ACT OR ACTIVITY FOR WHICH LIMITED LIABILITY COMPANIES MAY BE FORMED UNDER THE ACT (RI LIMITED LIABILITY COMPANY ACT) AND ENGAGING IN ANY AND ALL LAWFUL ACTIVITIES NECESSARY OR INCIDENTAL TO THE FOREGOING."

**5. Principal Office Address**

No. and Street: 999 MAIN STREET  
UNIT 708

City or Town: PAWTUCKET State: RI Zip: 02860 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: JEANETTE NUMBERS Contact Title:

No. and Street: 117 DEXTERDALE ROAD

City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

JEANETTE NUMBERS 117 DEXTERDALE ROAD PROVIDENCE , RI 02906

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 13 Day of December, 2018 at 3:23:33 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JEANETTE NUMBERS  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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