



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 000799379		2. Exact name of the Limited Liability Company 303 METACOM AVENUE LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island OWN AND MANAGE RESIDENTIAL REAL ESTATE			
5. State of Formation RI					
6. Principal Office Address 5 ASYLUM ROAD			City WARREN	State RI	Zip 02885
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MARY K BRITO			Contact Title MEMBER		
Street Address 5 ASYLUM ROAD			City WARREN	State RI	Zip 02885
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 MARY K BRITO				Date 01/23/2019	
Signature of Authorized Person <i>Mary K Brito</i>			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
JAN 28 2019
 BY 1916-1251

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