



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 122968		2. Exact name of the Limited Liability Company CHARLESTOWN VILLAGE, LLC			
3. NAICS Code 531110 53 - Real Estate and Rental and		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE PURCHASE, SALES AND RENTALS			
5. State of Formation RI					
6. Principal Office Address 5000 SOUTH COUNTY TRAIL		City CHARLESTOWN		State RI	Zip 02813
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name ALBERT REYNOLDS			Contact Title MEMBER/PRESIDENT		
Street Address 5000 SOUTH COUNTY TRAIL		City CHARLESTOWN		State RI	Zip 02813
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 ALBERT REYNOLDS				Date 04 February 2019	
Signature of Authorized Person 				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

FEB 14 2019

BY

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FORM 632 - Revised: 08/2016