



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

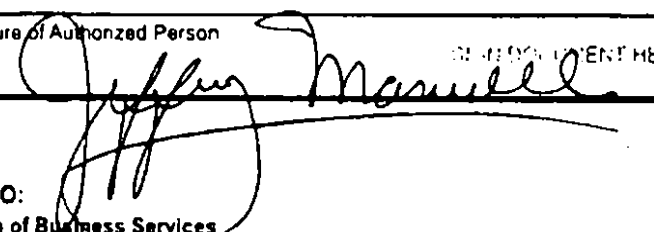
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Annual Report for the year: 2019
Limited Liability Company

MAR 27 2019

- Filing period: September 1 - November 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

BY 14530
OK

1. Entity ID Number 505861		2. Exact name of the Limited Liability Company 57 SHARON STREET ASSOCIATES, LLC			
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE PROPERTY MANAGEMENT AND HOLDING COMPANY			
5. State of Formation RI					
6. Principal Office Address 1845 SMITH STREET			City NORTH PROVIDENCE	State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JEFFREY M. MARWELL			Contact Title PRESIDENT		
Street Address 1845 SMITH STREET			City NORTH PROVIDENCE	State RI	Zip 02904
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 JEFFREY M. MARWELL				Date 03/18/19	
Signature of Authorized Person 					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov