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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

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2019 MAY 28	PH 12: 41

1. Entity ID Number 147749		2 Exact name of the Limited Liability Company C&B Marlborough Associates, LLC					
3. NAICS Code	4. Brief desci	4. Brief description of the character of business conducted in Rhode Island					
531120	Real Estate	Real Estate					
5. State of Formation RI							
6. Principal Office Address	•		City	State	Zıp		
10 Greene Street			Providence	RI	02903		
7. Mailing Address of Limite	d Liability Company	y and Name or Tit					
Contact Name Richard P. Baccari		Contact Title Manager					
Street Address 10 Greene Street		City Providence	State RI	^{Zip} 02903			
	<u>.</u>	of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name Richard P. Baccari		Manager Name					
Street Address 10 Greene Street		Street Address					
City Providence	State RI	Zip 02903	City	State	Zıp		
Manager Name		Manager Name					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
	ı			Check the box to	indicate an attachment		
9. Resident Agent in Rhode	Island. This informa	tion is currently of re	ecord with the Department of Sta	ite. Changes require fili	ng Form 642.		
Under penalty of perjury, statements, and that all s			mined this report, including and correct.	g any accompanyin	ng schedules and		
Name of Authorized Person Autom Date 5.20-1				20-19			
Signature of Authorized Per	Liehu	A liev	OCUMENT HERE	<u> </u>			

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 10/2017