



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.

FILED
MAY 28 2019
 BY 3803 AS

1. Entity ID Number <u>1663455</u>		2. Exact name of the Limited Liability Company <u>PLAT 365 LOT 167/173 LLC</u>			
3. NAICS Code <u>531390</u>		4. Brief description of the character of business conducted in Rhode Island <u>TO ENGAGE IN THE BUSINESS OF MANAGING, HOLDING, OWNING, CONVEYING AND LEASING REAL ESTATE AND OTHERWISE DEALING WITH REAL ESTATE.</u>			
5. State of Formation <u>RHODE ISLAND</u>					
6. Principal Office Address <u>17 ARNOLD'S NECK DRIVE</u>			City <u>WARWICK</u>	State <u>RI</u>	Zip <u>02886</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>JOHN DICKERSON, JR</u>			Contact Title <u>MEMBER</u>		
Street Address <u>40 17 ARNOLD'S NECK DRIVE</u>			City <u>WARWICK</u>	State <u>R.I.</u>	Zip <u>02886</u>
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 <u>NONE</u>			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 <u>JOHN DICKERSON, JR</u>				Date <u>5-24-19</u>	
Signature of Authorized Person <u>[Signature]</u>					

MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov