



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

FILED

AUG 23 2019 *RL*

STAMP

FOR
SECRETARY OF STATE
USE ONLY

Annual Report for the year: 2019
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.

1726

1. Entity ID Number 000160258		2. Exact name of the Limited Liability Company SANTA CIRCLE LLC			
3. NAICS Code 53110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE OWNERSHIP			
5. State of Formation FL					
6. Principal Office Address 5 SANTA CIRCLE		City JOHNSTON		State RI	Zip 02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name HERBERT SANTAGATA			Contact Title MEMBER		
Street Address 5 SANTA CIRCLE			City JOHNSTON	State RI	Zip 02919
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 HERBERT SANTAGATA				Date 8/21/19	
Signature of Authorized Person <i>Herb Santagata</i>				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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