



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

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.

FILED
 SEP 03 2019
 1504

STAMP
 FOR SECRETARY OF STATE USE ONLY

1. Entity ID Number 144771		2. Exact name of the Limited Liability Company WIMBORNE AND SUMMERTREE, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE CONSULTING			
5. State of Formation RHODE ISLAND					
6. Principal Office Address PO BOX 3113		City NEWPORT	State RI	Zip 02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name ALLAN BOOTH			Contact Title MANAGER		
Street Address PO BOX 3113		City NEWPORT	State RI	Zip 02840	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name ALLAN BOOTH		Manager Name			
Street Address PO BOX 3113		Street Address			
City NEWPORT	State RI	Zip 02840	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 <i>Allan Booth</i>				Date <i>8-24-2019</i>	
Signature of Authorized Person <i>[Signature]</i>				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