

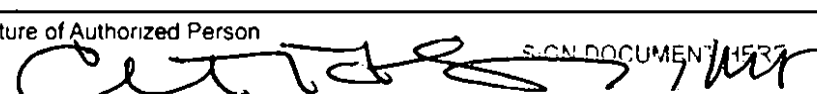


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

1. Entity ID Number 1678171		2. Exact name of the Limited Liability Company Katydid Cottage LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island real estate holding			
5. State of Formation Rhode Island					
6. Principal Office Address 404 Main Street		City East Greenwich		State RI	Zip 02818
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Christine Redfern			Contact Title		
Street Address P.O. Box 1907			City East Greenwich		State RI Zip 02818
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 Christine Redfern				Date 9/4 , 2019	
Signature of Authorized Person  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

FILED

SEP 09 2019

BY

FORM 632 - Revised 10/2017