

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.

FILEDSTAND
SEP 0 9 2019 OV
3634

Entity ID Number	2. Exact name of the Limited Liability Company					
790041	Louisquisset Pike, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531311	To hold and manage real estate.					
5 State of Formation	1					
Rhode Island						
6 Principal Office Address			City	State	Zip	
1988 Louisquisset Pike			Lincoln	RI	02865	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Michael F. Elliott			Contact Title Manager			
Street Address 1988 Louisquisset Pike			City Lincoln	State RI	^{Zip} 02865	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name Michael F. Elliott			Manager Name John Trojan, Jr.			
Street Address 1988 Louisquisset Pike			Street Address 1988 Louisquisset Pike			
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
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						
Name of Authorized Person Michael F. Elliott Date 9.3-19						
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