RI SOS   Filing Number: 201920277390   Date: 9/16/2019 4:00:00 PM

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 **0016631₂₃**	2. Exact name of the Limited Liability Company ## 23 DOWLING VILLAGE LLC			
3. NAICS Code **531120**	4. Brief description of the character of business conducted in Rhode Island **BUSINESS OF MAKING AND MANAGING INVESTMENT REAL ESTATE**			
5. State of Formation **RI**				

6. Principal Office Address **P.O. BOX 2044**	City **NATICK**	State **MA**	Zip **01760**

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name **JAMES POLYMEROS**	Contact Title **MANAGER**		
Street Address **P.O. BOX 2044**	City **NATICK**	State **MA**	Zip **02493**

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name **JAMES POLYMEROS**			Manager Name **SUZANNE POLYMEROS**		
Street Address **P.O. BOX 2044**			Street Address **P.O. BOX 2044**		
City **NATICK**	State **MA**	Zip **01760**	City **NATICK**	State **MA**	Zip **01760**
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 **JAMES POLYMEROS**	Date **9/10/19**
Signature of Authorized Person	

FILED

SEP 16 2019

BY 2419

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 632 - Revised: 10/2017