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

FILED

SEP 2 3 2019

1553

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 **1657799**	2. Exact name of the Limited Liability Company **100 Jefferson LLC**			
3. NAICS Code **53110**	4. Brief description of the character of business conducted in Rhode Island **To buy, sell, hold and manage real estate**			
5. State of Formation **Rhode Island**				

6. Principal Office Address **362 Broadway**	City **Providence**	State **RI**	Zip **02909**

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name **Thomas S. Hemmendinger**	Contact Title **Attorney**		
Street Address **362 Broadway**	City **Providence**	State **RI**	Zip **02909**

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

Manager Name **Robert P. Ferris**			Manager Name		
Street Address **PO Box 814**			Street Address		
City **Shelter Island Heights**	State **NY**	Zip **11965**	City	State	Zip
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 **Robert P. Ferris, Manager**	Date 07-06-19
Signature of Authorized Person	Robert P. Ferris, Manager

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov

FORM 632 - Revised: 10/2017