S	tate of Rhode Island and Pr Office of the Secret	
	Division Of Busines	ss Services
	148 W. River	
Lant	Providence RI 029 (401) 222-3	
HOPE	· · · · ·	
Limited Liability Company Annual Report		
Filing Period: September 1 - November 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing		
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-		
16-66(b&c)) is subject to a penalty fee of \$25.00.		
ANNUAL REPORT YEAR: 2019		
1. ID No. <u>000163176</u>		
2. Exact Name of the Limited Liability Company $\underline{FBC/WEYBOSSET LLC}$		
3. State of Formation		
State: <u>RI</u>		
ARTICLE III		
Enter the six divit NAICC Code that best describes the primery business conducted by the optimy Developed		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.		
010000		
<u>813990</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island		
HOTEL		
5. Principal Office Addre	SS	
No. and Street: 10 NO	ORTH MAIN STREET	
		ate: <u>MA</u> Zip: <u>02722</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
-		
Contact Name: Contact Title: No. and Street: <u>10 NORTH MAIN STREET</u>		
		te: <u>MA</u> Zip: <u>02720</u> Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS		
Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	JAMES J KARAM	38 HIGHLAND ROAD TIVERTON, RI 02878- USA
		. ,

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JAMES J. KARAM 35 NANAQUOKET ROAD TIVERTON, RI 02878

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 1 Day of October, 2019 at 10:03:00 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JAMES J KARAM

Signature of Authorized Person

Form No. 632 Revised 09/07

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