

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	2 Evactina	me of the Limite	nd Liability Company			
000135255	Exact name of the Limited Liability Company     Middletown Center Parcel, LLC					
3. NAICS Code 53\\W	Brief description of the character of business conducted in Rhode Island commercial property					
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
33 College Hill Road, Building 15			Warlwick	RI	02886	
7. Mailing Address of Limited Lia	bility Compa	ny and Name o	Title of Contact Person	· · · · · · · · · · · · · · · · · · ·	•	
Contact Name Brian Bucci			Contact Title Managing M	Contact Title Managing Member		
Street Address PO Box 6187			City Warwick	State Ri	<sup>Zip</sup> 02887	
8. List ALL managers (names a	nd addresses	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name Brian Bucci			Manager Name			
Street Address SAME as above			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
· · · · · · · · · · · · · · · · · · ·	<u></u>			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 Date						
Bnan A Bucci   10  8  9						
Signature of Authorized Person						
CORP. 488 CD.						

FILED

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 2 1 2019 KM.

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