s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00		
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-30	treet 04-2615			
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					
<b>1. ID No.</b> <u>000521757</u>					
2. Exact Name of the Limited Liability Company Consolidated Analytics Asset Management, LLC					
3. State of Formation					
State: <u>DE</u>					
	ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.					
<u>531311</u>					
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island					
PROVIDES REAL ESTATE MARKETING AND MANAGEMENT SERVICES.					
5. Principal Office Address					
No. and Street: <u>1500 SOUTH DOUGLASS ROAD</u> <u>SUITE 110B</u>					
City or Town: <u>ANAH</u>	EIM	State: <u>CA</u> Zip: <u>92806</u> Cou	ntry: <u>USA</u>		
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:					
Contact Name: <u>RYAN KINCH</u> Contact Title: <u>SVP</u> No. and Street: <u>1500 S DOUGLASS RD</u> SUITE 100					
City or Town: ANAHEIM State: CA Zip: 92806 Country: USA					
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS					
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Co	de, Country		

THE	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	LIANA KLUMPP	17-29 MAIN STREET, SUITE 210

		CORTLAND, NY 13045 USA	
MANAGER	KENNETH TUCHTAN	7809 ORCHARD GATE COURT BETHESDA, MD 20817 USA	
MANAGER	VICKIE GASKILL	10615 SE 256 ST., SUITE 202 KENT, WA 98030 USA	
MANAGER	EVAN RUSSELL	102 LOWELL RD., #114 NORTH READING, MA 01864 USA	
MANAGER	DON JANICH	1132 CENTRAL AVE., BILLINGS, MT 59102 USA	
MANAGER	THOMAS KARRAS	12460 CRABAPPLE, #368 ALPHARETTA, GA 30004 USA	
MANAGER	LEWIS ROBERTS	20041 SEAGROVE, SUITE 1306 ESTERO, FL 33928 USA	
MANAGER	C. LARRY MYER	1715 ½ W 39TH ST. #206 KANSAS CITY, MO 64111 USA	
MANAGER	JESSICA JENKINS	5442 LAKE CHARLES STREET NORTH LAS VEGAS, NV 89031 USA	
MANAGER	KATHY GATES	16810 W. HARRISON ST. GOODYEAR, AZ 85395 USA	
MANAGER	TAMMY GOLDING	4200 SILVER, SUITE D ALBUQUERQUE, NM 87108 USA	
MANAGER	RON SHAFER	12405 SW CANVASBACK BEAVERTON, OR 97007 USA	
MANAGER	CONSOLIDATED ANALYTICS INC.	1500 S. DOUGLASS ROAD, SUITE 110B ANAHEIM, CA 92806 USA	

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

REGISTERED AGENT SOLUTIONS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

**Signed this 24 Day of October, 2019 at 12:50:55 PM 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 RYAN J KINCH

Signature of Authorized Person

Form No. 632 Revised 09/07

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