



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

Annual Report for the year: **2019**
 Limited Liability Company

FILED
OCT 28 2019
 1016
STAMP
OR

- 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 000793916		2. Exact name of the Limited Liability Company EAST COAST LEGACY VENTURES, LLC			
3. NAICS Code 525990		4. Brief description of the character of business conducted in Rhode Island TO INVEST IN ONE OR MORE BUSINESS VENTURES			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 35 SOCKANOSSET CROSS ROAD			City CRANSTON	State RI	Zip 02920
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name WILLIAM N. JANIKIES			Contact Title MANAGER		
Street Address 35 SOCKANOSSET CROSS ROAD			City CRANSTON	State RI	Zip 02920
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name WILLIAM N. JANIKIES			Manager Name CYNTHIA J. SIMONSON		
Street Address 35 SOCKANOSSET CROSS ROAD			Street Address 35 SOCKANOSSET CROSS ROAD		
City CRANSTON	State RI	Zip 02920	City CRANSTON	State RI	Zip 02920
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 CYNTHIA J. SIMONSON				Date 10/23/19	
Signature of Authorized Person 			SIGN DOCUMENT HERE		

MAIL TO:
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