RI SOS Filing Number: 201926865320 Date: 10/31/2019 4:00:00 PM

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State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

STAMP

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.

<b>-</b> -::	 'ATP

	·						
1. Entity ID Number		2. Exact name of the Limited Liability Company					
825643	DDS REALTY MANAGEMENT, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53 111O	To buy, sell, and manage residential real property.						
5. State of Formation	1						
RI							
6. Principal Office Address			City	State	Zip		
11 FESSENDEN ROAD			BARRINGTON	RI	02806		
7. Mailing Address of Limited Li	•	y and Name or Tit					
Contact Name JOHN ST. ANGELO			Contact Title MEMBER				
Street Address 11 FESSENDEN ROAD			City BARRINGTON	State RI	<sup>Zip</sup> 02806		
8. List ALL managers (names a		of the Limited Lia			MEMBERS		
Manager Name JOHN ST. ANGELO			Manager Name DIANE ST ANGELO				
Street Address 11 FESSENDEN ROAD		Street Address 11 FESSENDEN ROAD					
City BARRINGTON	State RI	Zip 02806	City BARRINGTON	State RI	<sup>Zip</sup> 02806		
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 Isla							
Under penalty of perjury, I destatements, and that all states	ciare and affin ments contain	m that I have exa led herein are tru	mined this report, including se and correct.	any accompanyin	ng schedules and		
Name of Authorized Person					Date		
JOHN ST. ANGELO					119		
Signature of Authorized Person	h	SIGN D	OCUMENT HERE				
			FH	.ED			

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 3 1 2019