



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

STAMP

FOR
 SECRETARY OF STATE
 USE ONLY

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 001685549		2. Exact name of the Limited Liability Company 169 MAIN STREET, LLC			
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island Manage Real Estate			
5. State of Formation RI					
6. Principal Office Address 169 Main Street		City Westerly	State RI	Zip 02891	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Samuel J. Agnelo, Jr.			Contact Title Member		
Street Address 305 Pequot Trail		City Pawcatuck	State CT	Zip 06379	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
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 <i>SAMUEL J. AGNELLO JR</i>				Date <i>10/28/19</i>	
Signature of Authorized Person <i>[Signature]</i>				SIGN DOCUMENT HERE	

FILED

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MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov