



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

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.

FILED **STAMP**
NOV 07 2019
2782 a

1. Entity ID Number 001681111		2. Exact name of the Limited Liability Company CGRI Providence Branch LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Development of Real Estate			
5. State of Formation Rhode Island					
6. Principal Office Address 1414 Atwood Avenue		City Johnston		State RI	Zip 02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kelly Coates			Contact Title Authorized Trustee		
Street Address 1414 Atwood Avenue		City Johnston		State RI	Zip 02919
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 Kelly Coates				Date 10/23/19	
Signature of Authorized Person 				2019 DOCUMENT HERE	

MAIL TO:

Division of Business Services

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