RI SOS Filing Number: 201927306660 Date: 11/7/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

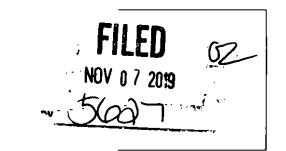
Department of State - Business Services Division

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.



1. Entity ID Number 001681114	2 Exact name of the Limited Liability Company CGRI Wakefield LLC					
3 NAICS Code	Brief description of the character of business conducted in Rhode Island					
531110	Development of Real Estate					
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
1414 Atwood Avenue			Johnston	RI	02919	
7. Mailing Address of Limited Li	ability Compa	any and Name o	r Title of Contact Person		<u>, </u>	
Contact Name Kelly Coates			Contact Title Authorized Trustee			
Street Address 1414 Atwood Avenue			City Johnston	State RI	^{Zip} 02919	
8. List ALL managers (names a	nd addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	∠ıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
	•		1	Check the box to	indicate an attachment	
9. Resident Agent in Rhode Isla						
Under penalty of perjury, I de statements, and that all state	clare and aff ments conta	īrm that I have ined herein are	examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person				Date		
Kelly Coates				10/23/19		
Signature of Authorized Person		AM	LOCUMPY OF E	•		
· · · · · · · · · · · · · · · · · · ·	-		, <u> </u>		-	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov