

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.

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	NOV 0 7 2019	<i>W</i>	
~v	584	•.	_

1. Entity ID Number 001681110		2. Exact name of the Limited Liability Company CGRI Bristol LLC					
3 NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island					
531110	Developm	Development of Real Estate					
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zıp		
1414 Atwood Avenue			Johnston	RI	02919		
7. Mailing Address of Limit		iny 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	^{Ζιρ} 02919		
	mes and addresse:	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address				
City	State	<i>7</i> ip	City	State	Zip		
Manager Name	•	•	Manager Name				
Street Address			Street Address				
City	State	7 ₁ p	City	State	Zıp		
			<u> </u>	Check the box to	indicate an attachment		
9. Resident Agent in Rhod	le Island. This inforn	nation is currently	of record with the Department of S	tate. Changes require fili	ng Form 642.		
Under penalty of perjury statements, and that all	r, I declare and aff statements contai	irm that I have ined herein are	examined this report, includi true and correct.	ng any accompanyir	ng schedules and		
Name of Authorized Perso	Date	Date					
Kelly Coates		, /1		10/23/19			
Signature of Authorized Pe	erson G	Alle SIG	N DOLUMENT HERE				

MAIL TO:

Division of Business Services

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

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