

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

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.

	NOV 1 2 2019	_
BY_	1208	5

					2/-		
1. Entity ID Number	I _		iability Company				
	Lawton	, LLC	<u> </u>				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
531110	Real Estate						
5. State of Formation							
RI							
6. Principal Office Address		- ,	City	State	Zip		
One Rhodes Place			Cranston	RI	02905		
7. Malling Address of Limited Lia	bility Company	and Name or Tit					
Contact Name Hodges Lawton C	harities		Contact Title Manager				
Street Address One Rhodes Place			City Cranston	State RI	^{Zip} 02905		
8, List ALL managers (names ar		of the Limited Lia	bility Company, IF APPLICA	ABLE - DO NOT LIST N	IEMBERS		
Manager Name Hodges Lawton (Managor Namo James Desmarais, President				
Street Address One Rhodes Plac			Street Address 66 Massasoit Drive				
Clty Cranston	State RI	^{Zip} 02905	Warwick	State R1	₹ 0 2888		
Managor Name Frank DiMascio, Secretar	у		Manager Namo				
Street Acdress 1100 Atwood Avenue			Street Address				
^{Cjty} hnston	State	^z 02919	City	State	Zip		
				Check the box to in	ndicate an attachment 🗌		
9. Resident Agent In Rhode Islan	nd. This Informat	lon is currently of re	ecord with the Department of S	tate. Changes require filin	g Form 642.		
Under penalty of perjury, I dec statements, and that all staten	lare and affirm ents containe	n that I have exe ed herein are tru	mined this report, including and correct.	ng any accompanying	g schedules and		
Name of Authorized Person	Date						
Hodges Lawton Charities by	FRAN	اد آ) ،	MASCID	11 -	4-19		
Signature of Authorized Person							

MAIL TO:

Division of Business Services

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

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