

148 W. River Street Providence, RI 02904-2615 401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR ______ 2019

Filing Period: September 1 - November 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

*In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25,00.

001687043	2. Exact name of the limited liability company Johnson Brothers Rhode Island Realty Investment II, LLC				3. NAICS Code 531317	
4. Brief description Real estate inv	of the character of the busin estment	ess which is actually condu	cted in Rhode Island	I in Rhode Island 5. State of Formation Rhode Island		
6. Principal office address 55 Sand Island Lane			City Otisfield	State ME	7 <i>ip</i> 04270	
7. MAILING ADD Contact Name Corey E. John		BILITY COMPANY AND	NAME OR TITLE OF CONTA Contact Title Manager	ACT PERSON:		
Street Address 55 Sand Island Lane			City Otisfield	State ME	7 <i>ip</i> 04270	
8. NAME AND ADI Manager Name Corey E. Joh	FILL IN SPACE	GER OF THE LIMITED S BEFORE USING ATT,	LIABILITY COMPANY, IF AI ACHMENTS ("X" BOX FO Manager Name Brendon E. Joh	OR ATTACHMENT)	LIST MEMBER	
Manager Name	FILL IN SPACE		ACHMENTS ("X" BOX FO Manager Name	nnson	LIST MEMBER	
Manager Name Corey E. Joh	FILL IN SPACE		ACHMENTS ("X" BOX FO Manager Name Brendon E. Joh	nnson	LIST MEMBER Zip 04270	
Manager Name Corey E. Joh Street Address 55 Sand Islan City	FILL IN SPACE nson d Lane State ME	ES BEFORE USING ATT,	ACHMENTS ("X" BOX FO Manager Name Brendon E. Joh Street Address 55 Sand Island I	hnson Lane State ME	Zip	
Manager Name Corey E. Joh Street Address 55 Sand Islan City Otisfield Manager Name	FILL IN SPACE nson d Lane State ME hnson	ES BEFORE USING ATT,	ACHMENTS ("X" BOX FO Manager Name Brendon E. Joh Street Address 55 Sand Island I City Otisfield Manager Name	hnson Lane State ME	Zip	
Manager Name Corey E. Joh Street Address 55 Sand Islan City Otisfield Manager Name Garrick B. Jo Street Address	FILL IN SPACE nson d Lane State ME hnson	ES BEFORE USING ATT,	ACHMENTS ("X" BOX FO Manager Name Brendon E. John Street Address 55 Sand Island I City Otisfield Manager Name Darryl E. Johns Street Address	hnson Lane State ME	Zip	

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b)

File Daie	
Check No.	
<i>B</i> y::	
FO	R SECRETARY OF STATE USE ONLY

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.

Coron Johnson 10/16/19
Signature of Minorfed Person Date

Corey E. Johnson, Manager