RI SOS Filing Number: 202035488820 Date: 2/27/2020 4:00:00 PM

(RR)

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2020 Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILE	D STABB
FEB <b>27</b>	2020 1720 15
BY	رو خلال

1 Entity ID Number	mber 2. Exact name of the Corporation							
84650	RIP Management Company, Inc.							
3. Principal Office Address			City		State	Zip		
1140 Reservoir Avenue		Cranston		RI	02920			
4. NAICS Code	Brief description of the character of business conducted in Rhode Island							
53	To acquire, manage, own, hold the membership interest in Reservoir Investment Partners, LLC,							
State of Incorporation	whose sole purpose is to acquire, own, maintain, operate the property at 1140 Reservoir Ave.,							
Rhode Island	Cranston, RI known as Century Plaza.							
7. List ALL officers (names and ad	dresses)			Check	the box to i	ndicate an attachment		
President Name Elizabeth A. Procaccianti			Vice-President Name					
Street Address 1140 Reservoir Avenue			Street Address					
City Cranston	State RI	<sup>Zip</sup> 02920	City		State	Zıp		
Secretary Name Elizabeth A. Proci	accianti		Treasurer Nan	Treasurer Name Elizabeth A. Procaccianti				
Street Address 1140 Reservoir Avenue		Street Address 1140 Reservoir Avenue						
City Cranston	State RI	Zip <b>02920</b>	City Cranston		State RI	<sup>Zıp</sup> 02920		
8. List ALL directors (names and a	ddresses)		•	Check	the box to i	ndicate an attachment 🔲		
Director Name Elizabeth A. Procaccianti				2				
Street Address , 1140 Reservoir Avenue			Street Address					
Cranston	State RI	<sup>Zip</sup> 02920	City		State	Zip		
Director Name			Director Name					
Streel Address			Street Address	Street Address				
City	State	Zip	City		State	Zıp		
9. Shares Authorized	<del>-1</del>	10 Shares Iss	10 Shares Issued		Check the box to indicate an attachment			
This information is currently of reco	ord in the				CLASS/SERIES PAR VALUE			
Department of State.  Changes require an additional filing.		100	100		Common			
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or								
trustee, this report must be executed on behalf of the corporation by the receiver or trustee.  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 Representative  Date								
Name of Authorized Representative  Elizabeth A. Prosaccianti, President  2 - 2 4 - 2020								
Signature of Authorized Regresentative								
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MAIL TO:

**Division of Business Services** 

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

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