



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 144662		2. Exact name of the limited liability company 250 Warren Avenue Real Estate Company, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island OWNERSHIP AND DEVELOPMENT OF REAL ESTATE BUSINESSES			
5. Principal office address 250 WARREN AVE.		City EAST PROVIDENCE	State R.I.	Zip 02914	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name LINDA L. XIE		Contact Title MEMBER			
Street Address 250 WARREN AVE.		City EAST PROVIDENCE	State R.I.	Zip 02914	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐ ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name STEPHEN P. LEVESQUE		Address			
Address 167 BURNSIDE STREET		City CRANSTON	Zip 02910		

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



144662	
File Date	FILED
Check No.	OCT 24 2005
By:	By m80979
FOR 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.

Linda Xie **SEPT 15, 05**
Signature of Authorized Person Date
LINDA L. XIE
Print or Type Name of Authorized Person