

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Annual Report for the year: 2014 Limited Liability Company

2020 AUG - 6 AM 11:55

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

				<u>.</u>		
1. Entity ID Number						
98586	VILLA	be com	MON CONSTRU	JETIUN,	LLC	
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
237210	THE DEVELOPMENT OF RAW LAND					
5. State of Formation 101 DINTO MARKETABLE BUILDING LOTS.						
PHODE ISLAND MICH REPARTE BUILDING LOIS.						
6. Principal Office Address			City	State	Zip	
59A. ALTON BRADFORD Rd			HOPKINTON	RI	02808	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name PETER A. LINDQUIST			Contact Title MANAGEL			
Strect Address 11 MARKET ST.			CAMBRIDGE	State M.A	Zip 02139	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name PETER A. LINAQUIST			Manager Name TYREL E. RHODES			
Street Address // MARKET ST.			Street Address 59 A. ALTON BRAD FORD RD.			
City CAMBRIDGE	State M A	zip 2139	HOPRINTON	State RI	Zip 02808	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachme						
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
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 Person PETER A.	LINDQ	レパア		Date 6/30/20		
Signature of Authorized Person						
					<u></u>	

MAIL TO:

Division of Business Services

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

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

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BY 57415

FORM 632 - Revised: 10/20