

Annual Report for the year: 2019 Limited Liability Company

AUG 1 7 2020

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
001676955	BRC HARBORSIDE, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531311	Deci	الما تناها	PROPERTY MANAGERS		
5. State of Formation	145511	יבוז זובי	- TROTERTY THROTELES		
R.T.					
6. Principal Office Address			City	State	Zip
108 SHORE ROAD			WESTERLY	RT	02391
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name BRIAN CAPALBO			Contact Title OWNER		
Street Address 108 SHORE ROA)			City WESTERLY	State RT	Zip 02891
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name 60			Manager Name		
Street Addre			Street Address		
City .	T		- ity	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
		4	Check the box to indicate an attachment		
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 BRIAN CAPALBO Date 8/12/20					
Signature of Authorized Person SIGN DOCUMENT HERE					

MAIL TO:

Division of Business Services

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

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