



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year:** 2020  
**Limited Liability Company**

**FILED**  
**SEP 22 2020**  
 6052

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 001690544		2. Exact name of the Limited Liability Company 690 MAIN ST, LLC					
3 NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island OWNERSHIP AND MANAGEMENT OF INVESTMENT REAL ESTATE					
5. State of Formation RHODE ISLAND							
6. Principal Office Address 16 BUTTERWORTH AVE			City BRISTOL		State RI	Zip 02809	
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name EDWARD J COX II				Contact Title REGISTERED AGENT			
Street Address 16 BUTTERWORTH AVENUE			City BRISTOL		State RI	Zip 02809	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS							
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
Check the box to indicate an attachment <input type="checkbox"/>							
9 The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642							
<b>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.</b>							
Name of Authorized Person EDWARD J COX II					Date 09/19/2020		
Signature of Authorized Person 							

**MAIL TO:**  
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