	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
	148 W. River S		
Providence RI 02904-2615 (401) 222-3040			
HOPE	(401) 222-30	+0	
Limited Liability Com	pany		
Annual Report Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc		
16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2020			
1. ID No. <u>000789021</u>			
2. Exact Name of the Limited Liability Company <u>COURSE LEGEND LLC</u>			
3. State of Formation			
State: <u>RI</u>			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>711300</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in R	hode Island
GOLF INFORMATION	WEBSITE		
5. Principal Office Addre	SS		
No. and Street: 269 GREENVILLE AVENUE			
City or Town:JOHNSTONState: RIZip: 02919Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: 18 OAKRIDGE ROAD			
City or Town: <u>SCITUATE</u> State: <u>RI</u> Zip: <u>02857</u> Country: <u>USA</u>			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip	o Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JONATHAN L. UCRAN 651 PUTNAM PIKE GREENVILLE, RI 02828

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 23 Day of September, 2020 at 10:38:32 AM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By JONATHAN UCRAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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